List all income that househo	old members e	earn.					
Name				For	· ince	ıme	
Relationship to Applicant	self	spouse	 	per	iod, s	specij	6
Age				eith	er W	eekly	,
Employer					nthly	, ly, or	,
Years Employed					rly.	y, or	
Gross (Pre-Tax) Income			all a	W	M	0	3
Wages/Salaries					1	X	1
Sales Commissions					Ī		
Investment Income				-	1		t
Net Business Income				-		-	+
Rental Income							t
Retirement Income							Ť
Child Support					1		t
Alimony				1			1
Other (attach description)			 	ļ	·		-

	INDIVIDUAL AB	LITY TO PAY	CLAIM	
	Financial D	ata Request Forr	n	
This form requests informat pay for environmental clean sheets of paper. Note that finformation you wish to proadequately described through	nup or penalties. If you no further documentation material or case ovide supporting your case	eed more space to y be requested of e is welcome, pa	for your answers, plea f any of your response	se attach additional
	Cei	tification		
Under penalties of perjury, correct, and complete to the prosecution by the U.S. Env provide any information that	best of my knowledge and ironmental Protection A	nd belief. I furth gency to the full	er understand that I west extent possible und	ill be subject to er the law should I
Signature:		Date:	WAA A A A	
Name:		And the control of th	A	
Spouse's Name:	THE RESERVE AND A STATE OF THE			
Names of Additional House	shold Members:	The state of the s		
Street Address:				
City:	State:	Z	ip:	
County:		***************************************		

## **Household Living Expenses**

List household living expenses typical of last year, indicating if any are likely to change significantly in the current year. If you own an operating business, exclude any business expenses; instead, attach any available financial statements for your business.

		Period			
<u>Expense</u>	Amount	W	M	Q	Y
Rent					
Home maintenance					
Transportation (inc. auto maint.)					
Home heating oil, gas, etc.					
Electricity					
Water & sewer					
Telephone					
Food					
Clothing, personal care					
Medical					
Mortgage payments (principal and interest only)					
Car payments					
Credit card interest					
Educational loan payments					
Other debt payments					
Home insurance					
Life insurance			***************************************		
Auto insurance					
Medical insurance					
Property taxes					
Federal income taxes (net of any refunds)					
State & local income taxes (net of any refunds)					
FICA					
Other taxes					
Childcare					
Tuition					
Legal or professional fees					
Other (attach description)					

N	et	W	orth	1
1.4	C.L	***	,, ,,	

Provide the following information to the best of your ability. Data should be as current as possible. Estimates are acceptable; if you wish note such items with an "E". If you are the sole proprietor of a business, please list business assets and liabilities to the extent that the information sought is not already provided in your tax returns, in addition to personal assets and liabilities. Mark these entries with a "B" to identify them as business assets and liabilities.

	Assets	Liabilities	Comments
Bank Accounts - Name of Bank	Balance		
Checking, NOW, Savings, Money Market,	CDs etc.		
			e
			<u> </u>
Investment Trans (at also be added)			
Investment Type (stocks, bonds, etc.)	Market Value		
			<u> </u>
			>
Retirement Funds and Accounts	Market Value		
IRA, 401(k), Keogh, vested interest in com		tc.	S. 6 - 2 - 6 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7
			3
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			*
Life Insurance Policies	Cash Value		
Whole life, universal life, etc.			
			*1
V-l:-1 II IC O			The state of the s
Vehicles Used for Commuting	Market Value	Loan Balance	
Cars, trucks, motorcycles, etc.: list up to t	wo venicies usea for con	nmuting purposes.	
Other Vehicles	Market Value	Loan Balance	
Cars, trucks, motorcycles, recreational ve			
		*	
Primary Residence	Market Value	Mortgage Balance	
Other Real Estate	Market Value	Mortgage Balance	
Lands, buildings, land with buildings.			

Other Debts and/or Assets  Market Value  Debt Balance	Personal Property	Market Value	Debt Balance	
Other Debts and/or Assets  Market Value  Debt Balance	Household Goods and Furniture, Jew with a value greater than \$500.	velry, Art, Antiques, Collection	s, Precious Metals, e	tc.; list only items
	Credit Cards and Lines of Credit		Balance Due	
Any other assets and any debts on those assets, plus any other debts owed to individuals, fixed obligations, taxes owed, overdue alimony or child support, etc.	Any other assets and any debts on tho	se assets, plus any other debts	Debt Balance	fixed obligations

	Additional Information
F	For any question that you check off as applicable, provide additional information below or on separate page
	Reason to believe financial situation will change during the next year?
C	Currently selling or purchasing any real estate?
P	Property held by other person/entity on applicant's behalf?
P	Party in pending lawsuit (other than this enforcement action)?
A	Any belongings repossessed in last three years?
I	s applicant a Trustee, Executor, or Administrator?
P	Participant or beneficiary of estate or profit-sharing plan?
Г	Declared bankruptcy in last seven years?
R	Receive any type of federal aid or public assistance?