

Client: _____ Phone #: _____

Initials: _____

FINANCIAL ASSISTANCE RULES & INSTRUCTIONS

The application process is to determine eligibility for temporary emergency financial assistance. To best serve clients, you are required to have all the documents identified below printed and/or original bills at the time of the interview.

Please bring household income & expenses paid 30 days back from the day of your interview for assistance.

INCOME:

- Lump sum settlement in the past 5 years
- Checking/Savings/ Cash App/Venmo/Zelle/all online money transfers
(print-outs for **TRANSACTIONS** from ___/___ - ___/___) *example*
Note: we are not requiring bank statements
- Pay Stubs
- VA Compensation/Pension
- Social Security/SS Disability
- Child Support/Alimony
- Retirements/Drill Pay
- ALL School Stipends: Voc Rehab, Post 911, etc.
- Income Tax Return
- Disability Pay/Workers Compensation
- Rental Property/AMHA Stipend
- TSP/Annuity/401K, etc.
- Government Assistance
- ALL Other Loans/ Payday Loans
- Unemployment

-Other: _____

FILE:

- Photo I.D. (s)
- DD214/Discharge Paper(s)
- Proof of residency in Summit County for 90 days
- Marriage Certificate/Domestic Partner papers(s)
- Birth Certificate(s)/Death Certificate/SS Cards
- Adoption/Custody Paper(s)
- Paternity Test for: _____
- Current School Record(s)/Report Card(s)/Enrollment(s)

EXPENSES: Bring ALL current bills available

- Mortgage Statement-**must provide FAX # & contact person**
- Rent/Deposit/AMHA/Section 8
- Electric/Water/Sewer/Trash
- Gas/Heating Fuels
- Vehicle Statement-**must provide Fax # & contact person**
- Auto/Home/Rental/Life or any Insurances-
provide policy, FAX # and contact person
- Medical/Prescriptions, etc.
- Day Care (Adult and/or Child)
- Internet
- Loan Statements (personal, student, payday, etc.)
- Rent Appliance/Furniture
- License/Court/Legal Fees
- Tax Statement (IRS, State, City, Property)
- Vehicle Repairs – Must have 3 estimates and proof of registration
- Home Repairs – must have 3 estimates, if Owner
- Receipts for **ALL** cash withdrawals for purchases
- Other _____

Property Owner Statement
Rental Lease Agreement
Disability Certificate
Release Form for: _____

Are you or any household member related to any employees or commissioners of the SCVSC? Y N

Following the rules and instructions will assist your determination for eligibility with temporary emergency financial assistance. Please make sure **ALL document are printed and brought in upon return**. This list is not inclusive to all possible financial assistance requirements.

Sign: _____ Date: _____