COMMUNITY CARE APPLICATION CHECK LIST

To ensure timely processing of your financial assistance application please attach the following documents when turning in your application

Copy of the first 2 pages of last year's tax statement for each household member 18 and older
Copies of pay check stubs for the past 3 months for each household member 18 and older
If tax statement is not available or not completed please attach the following documents
Copies of bank statements for the past 3 months for each household member 18 and older
Copies of pay check stubs for the past 3 months for each household member 18 and older
Proof of any income claimed other than regular wages for each household member 18 and older