

01 CASE NUMBER	02 CATEGORY	03 01	04 PAGE OF	A 00000000				06 BUDGETED JOB NUMBER	07 MAIL CD.				
08 DATE FILED	09 CASE NAME	10 CASE NAME CHANGE			11		12						
13 MAILING ADDRESS 1st LINE				14 MAILING ADDRESS 2nd LINE				15 CITY	16 STATE	17 ZIP CODE			
18 TEMPORARY ADDRESS 1st LINE				19 TEMPORARY ADDRESS 2nd LINE				20 TEMPORARY ADDRESS-CITY		21 STATE	22 ZIP CODE	23 (TEMP ADD) MOS	23 (TEMP ADD) BEG. MO.
24 RESIDENCE ADDRESS				25 COUNTY	26 GUARDIAN PAYEE/AUTHORIZED REPRESENTATIVE				27 M	28 I	29 DENIAL NOTICE	30	31

32 CLIENT NUMBER	33 CLIENT NAME	34 BIRTHDATE	35 SEX	36 RACE	37 SOC. SEC. ACCT. NO.	38 SOC. SEC. CLAIM NO.	39 ED
THIS LINE FOR ADDITIONAL INFORMATION ON CASE NAME							
a							
b							
c							
d							
e							
f							
g							
h							
i							
j							
k							

40 STATUS IN GROUP	41 W	42 A	42B GROSS EARNED	43 RSDI	44 V. A.	45 SSI/PEN	46 MEDICAL EFFECTIVE DATE	47 DEATH/DENIAL DATE	48 FS-MEDCOST PA-REFUGEE	49 DISO CODE AND DATE	50 CLIENT NUMBER VALIDATION
a											
b											
c											
d											
e											
f											
g											
h											
i											
j											
k											

ADJUSTED GROSS INCOME CALCULATIONS	51 TOTAL EARNED	52 TOTAL RSDI	53 TOTAL V.A.	54 TOTAL SSI	55 TOTAL RR	56 OTHER INCOME	57 TOTAL INCOME	58 DEDUCTIONS	59 ADJUSTED GROSS INCOME

B C U A D S G E E T	FOOD STAMPS				AFDC				MAO UNMET NEED				MAO APPLIED INCOME			
	61 ADJ. GROSS INCOME				62 EXC SHELTER				63 NET INCOME				64			
	65				66 ADJ. GROSS INCOME				67 REC. NEEDS				68 UNMET NEEDS			
	69				70 RECOMMENDED GRANT				71 TOTAL NEEDS				72 ADJ. GROSS INCOME			
	73				74 AVAILABLE INCOME				75 PERSONAL NEEDS				76 INCOME FOR SPOUSE			

FOOD STAMP CASE	78 TR	79 APPL. CODES	80 CERTIFICATION DATE	81 MOS. CERT.	82 LAST BENEFIT MO.	83 HH NO	84 AID	85 TEST	86 FR	87 NON	88 INELIG.	89 SSI	90 UTIL.	91 ACTION CODE	92 ACTION DATE	93 TEX. DRIVER'S LICENSE NUMBER	94

MISC.	111	112 FIRST CASE NUMBER	113 SECOND CASE NUMBER	114	115	116	117	118 MO. EARNED	SECTION XI DATA	119 FIRST BUDGET MO.	120 EARNED INCOME FIRST MONTH	121 EARNED INCOME SECOND MONTH	122 SECOND BUDGET MO.	123	124	125	126

PA CASE	127 T.P.	128 B.P.	129 GRANT EFF. DATE	130 RSDI INCREASE	XII ATP/BENEFIT ISSUANCE AND REPORTING												
131 T.R.	132 ACTION CODE	133 3 MO. J.	134 3 MOS. PRIOR APP. DATE	135	136 4 MOS. POST	137 SAV.	138	179 ISS/CAN	180 TYPE ISS	BENEFIT NUMBER	182 ISSUE DATE	183 BENEFIT MONTH	184 NET INCOME	185 BENEFIT AMOUNT	186 OTHER DATA	187 H.H. NO.	
139 SPECIAL REVIEW	140 CODE	141 PERIODIC REVIEW	142 HOLD CD	143	144	145	146										
143 F. ACT.	144	145	146	147	148												

A.I. INST. DEDUCT.	149 CODE	150 FROM	151 THRU	152 AMOUNT	153 OFF	154 START DATE	155 OVERPAYMENT AMOUNT	156 CASH PAID	157 SUSP.	158 MOS. W/H	159 BALANCE REMAINING	160 MOS. REMAIN

161 CERT.	162 VER.	163 NON.	164	165 MR	166 PROGRAM COMB. CODE	167	168	169	170	171	172	173	174	175	176	177	178	188 SIGNATURE
																		189 DATE SIGNED
																		190 EMP. NO.
																		191 TP ONLY