OMB Approved No. 2900-0095 Respondent Burden: 30 minutes

\(\) Department of Veterans Affairs

PENSION CLAIM QUESTIONNAIRE FOR FARM INCOME

1. VA FILE NUMBER

PRIVACY ACT NOTICE: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of

1974 or Title 5, Code of Federal Regulations 1.526 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status and personnel administration) as identified in the VA system of records, 58VA21/22 Compensation, Pension, Education, and Rehabilitation Records - VA, and published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. Giving us your SSN account information is mandatory. Applicants are required to provide their SSN under Title 38 USC 5101 (c) (1). The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. Information that you furnish may be utilized in computer matching programs with other Federal or state agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs.

RESPONDENT BURDEN: We need this information to determine eligibility for disability pension under 38 U.S.C. 1521, death pension under 38 U.S.C. 1521, death pension under 38 U.S.C. 1541 and 1542, parents dependency and indemnity compensation under 38 U.S.C. 1121. We estimate that you will need an average 30 minutes to review the instructions, find the information and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at

and complete this form. VA cannot conduct or sponso to a collection of information if this www.whitehouse.gov/omb/library/OMBINV.VA.EPA	number is not	displayed. Valid	d OMB control numb	ers can be	located on	the OMB Int		
INSTRUCTIONS: Before further action can be this form accurately and completely. If the answ					ning activity	7. Please answer a	ll questions on	
References in this form to "THIS YEAR" refer to the (If blank, "THIS YEAR" refers to the current calen to "LAST YEAR" refer to the 12 month period pre-	nces	OD STARTING DATE PER			ERIOD ENDING DATE			
2. FIRST - MIDDLE - LAST NAME OF VETERAN		SOCIAL SECURITY	4. VA OFFICE AND ADDRESS					
(Including crops, breeding livestock, o		-	L OF ALL GROSS R ntals, soil bank or ASC	-	atronage o	division, cash, re	ents, etc.)	
A. AMOUNT RECEIVED LAST YEAR	B. AMOUNT EX	XPECTED THIS YI	EAR	C. AMOUNT ANTICIPATED NEXT YEAR				
\$	\$							
		7. FARM OPER	ATING EXPENSES					
(Include landlord's share for all items in w	which he/she share	es expenses. Payr		gage are not ded	luctible. Do	1	· · · · · · · · · · · · · · · · · · ·	
ITEM (A)	AMOUNT SPENT LAST YEAR (B)	AMOUNT TO BE SPENT THIS YEAR (C)		TEM (D)		AMOUNT SPENT LAST YEAR (E)	AMOUNT TO BE SPENT THIS YEAR (F)	
HIRED LABOR			OTHER EXPENSES (Lis	st)				
FEEDS PURCHASED								
SUPPLIES PURCHASED								
MACHINE HIRE								
REPAIRS AND MAINTENANCE OF FARM BUILDINGS AND MACHINERY (Except dwellings)								
CASH RENT								
PROPERTY TAXES								
INSURANCE ON PROPERTY								
INTEREST ON MORTGAGE AND OTHER LOANS (Not payment on principal)			TOTAL EXPENSES \$			(Cols. B and E)	(Cols. C and F)	

8A. TOTAL ACREAC YOU	€ OWNED BY	8B. A	CREAGE RENTED	TO OTHERS	8C. ACREAG OTHERS	GE RENTED FROM	Ī 8	D. TOTAL A	CREAGE (DPERATED	BY YOU		
9. ACREAGE IN CROPS AND PASTURE				10. LIVESTOCK INFORMATION									
KIND NUMBER OF ACRES			KIND					TOTAL NUMBER					
(0 : 1		LAST YEAR	THIS YEAR		(Cattle, pigs, shee	ep, ducks, etc.)			ON FARM NOW				
		\longrightarrow											
					+								
		$\overline{}$											
PASTURE													
		(Furni:	sh the following i	11. TOTAL information about t	FARM WOR		elp and ot	hers)					
YEAR LINE NO.			ITEM (B)					PROPORTION (Check applicable boxes) (C)					
							NONE 1/4 1/2			2 3/4 ALL			
	1	PROPO	PROPORTION DONE BY YOU										
LAST yEAR 2 PROPORTION DONE BY HIRED HEL					LP								
	4	PROPO	PROPORTION BEING DONE BY YOU										
THIS YEAR	5	PROPO	ORTION BEING	TION BEING DONE BY HIRED HELP									
	6	(Includi	ing members o	• • • • • • • • • • • • • • • • • • • •									
12. PLEASE DESCH	(IBE ANY WOR	K YOU HAV	/E DONE FOR OTI	HERS DURING THE	E PAST YEAR A	AND THE AMOUN	T OF SALA	RY OR WAG	}ES YOU F	RECEIVED			
13. DO YOU RENT	YOUR FARM TO	OR FROM	VI SOMEONE ELSE	E?									
ПуES Пи				ental agreement or le	ease or a stater	nent setting forth in	detail parti	culars of the	agreement	t)			
14. DO YOU RECEI	VE INCOME FR	OM ANY S	OURCE OTHER T	HAN FARMING?									
YES N	NO (If "Yes,"	explain full	ly, including income	received)									
			CE ^r	RTIFICATION AND S	SIGNATURE C	DE CLAIMANT							
I CERTIFY THAT	the foregoing	statemen		orrect to the best of									
15A. DATE SIGNED 15B. SIGNATURE OF CLAIMANT					16. ADDRESS								
15C. DAYTIME PHONE NO. (Including Area Code) 15D. EVENING PHONE NO. (Including Area Code)			ding Area										
WITNESSES TO SIGNATURE OF CLAIMANT IF MADE BY "X" MARK													
of such witnesses m	nust be shown be	inessed by slow.	two persons to who	om the person makin	- -				and address	ses			
17A. SIGNATURE C	F WITNESS				17B. PRINTE	ED NAME AND ADI	DRESS OF	WITNESS					
18A. SIGNATURE OF WITNESS			18B. PRINTED NAME AND ADDRESS OF WITNESS										
PENALTY - The material fact, kn/	law provides :	severe pe false, or fo	nalties which inclor the fraudulent	clude fine or impriso acceptance of any	onment, or be payment to	oth, for the willful which you are no	submission tentitled.	on of any s	tatement	or evidenc	e of a		