U.S. Department of Homeland Security FEMA MDNPSC P. O. Box 10055 Hyattsville, MD 20782-7055



Dear Applicant:
The Federal Emergency Management Agency requests the following information in order to process a review of your account. Please send to the address above or fax to 1-800-827-8112 within 30 days from receipt of this packet.
xDEBT COLLECTION FINANCIAL STATEMENT (COMPLETE and SIGN enclosed form)
xBANK STATEMENTS (Most recent checking and savings if you have a checking and/or savings account)
<i>Note:</i> If you do not have bank statements, please provide an alternate form of income verification (such as pay stubs, SSI, AFDC, Social Security, Retirement, Unemployment assistance, Disability Statements, and/or Pension)
x MOST RECENT TAX RETURN
_x SUMMARY OF MONTHLY EXPENSES on the HOUSEHOLD EXPENSE LISTING. These are regular costs that are NOT included on the debt collection financial statement. These are expenses that occur monthly or at least regularly such as car insurance, home or renters insurance, health insurance, life insurance, medical bills, phone bills, cable bills and other regular costs. PLEASE TRY TO ESTIMATE THE AVERAGE COSTS PER MONTH, EVEN IF THE COSTS CHANGE EACH MONTH.
Please try to answer all questions on each form.
If you have questions or need help, please call 1-800-816-1122 between 9:00 AM and 8:00 PM, Eastern Time, Monday through Friday.
Sincerely,
Debt Collection Officer