

PART D – RESOURCES		PART E – EXPENSES	
List all cash your household will be able to get to during the disaster		List disaster-caused expenses that your household paid or expects to pay during this disaster. DO NOT INCLUDE EXPENSES THAT WERE PAID OR WILL BE PAID BY SOMEONE OUTSIDE YOUR HOUSEHOLD.	
	AMOUNT		AMOUNT
Checking accounts		Dependent care due to disaster	
Saving accounts		Funeral/medical expenses due to disaster	
Cash on hand		Moving and storage costs due to disaster	
		Temporary shelter expenses	
		Cost to protect property during disaster	
		Cost to repair or replace items for home or self-employment property	
		Other disaster-related expenses	
		Food destroyed in disaster	

PART F – CERTIFICATION AND SIGNATURE

I understand the questions on this application and the penalties for hiding or giving false information. My household is in need of immediate food assistance as a result of the disaster. I certify, under penalty of perjury, that the information I have given is correct and complete to the best of my knowledge. I also authorize the release of any information necessary to determine the correctness of my certification. I understand that if I disagree with any action taken on my case, I have the right to request a fair hearing orally or in writing.

APPLICANT, AUTHORIZED REPRESENTATIVE, OR WITNESS (if signed with an X)

_____ DATE: _____

PART G – PENALTY WARNING

If your household gets Supplemental Nutrition Assistance benefits, it must follow the rules listed below. We may choose your household for a Federal or State review sometime after you receive your Supplemental Nutrition Assistance benefits to make sure you were eligible for disaster aid.

DO NOT give false information or hide information to get or to continue to get Supplemental Nutrition Assistance benefits.

DO NOT give or sell Supplemental Nutrition Assistance benefits or authorization documents to anyone not authorized to use them.

DO NOT alter any Supplemental Nutrition Assistance authorization documents to get benefits you are not entitled to.

DO NOT use Supplemental Nutrition Assistance benefits to buy unauthorized items such as alcohol or tobacco.

DO NOT use another household’s Supplemental Nutrition Assistance benefits or authorization documents for your household.