2023 Application for Charity Newsies Christmas Food Basket

Name List EVERYONE in household:			al Security # t only last 4 digits)	Birthday	Age	Male/Female
***Circ	cle One: PICKU	P or DE	LIVERY for	the food l	box?**	k
Street Address			Apt. Number	er City & Zip Code		
Main Phone #			Alternate Phone #			
*IT IS YOUR RESPONS	ecial Directions: examp		· -			OUR OFFICE
Monthly Income			Monthly Expenses			
Employment			Ren	t/Mortgage		
Unemployment SS/SSD/SSI				Electric		
OWF/JFS/Kinship			G /E 10	Water		
Child Support			Gas/Fuel O	_		
Overage Checks				able/Phone Cell Phone		
Veterans Assistance				Insurance		
			Tra	nsportation		
Workman's Comp			114			
Other			IIa			
			110	Other TOTAL		
Other TOTAL my signature, I, (print natural refield County permission stated above:			give process this app	Other TOTAL Information & Dication for the		l Service of of holiday ben
Other			give process this app	Other TOTAL Information & Dication for the		

** Food Boxes will be delivered on Saturday, December 23rd **