

**City of WAYNE GOODFELLOWS, INC- CHRISTMAS ASSISTANCE**

**APPLICATION**

Applicants please note, in order to be considered you must:

1. MUST provide proof you live in the City of Wayne (valid ID, bill w/ address etc.)
2. Complete all portions of this application BOTH sides. SIGN the Application
3. Provide accurate and truthful information as requested (Any false information given may result in rejection of the application)
4. Note: Information will be verified but kept confidential
5. In applying, you are authorizing the Wayne Goodfellows to verify the information with the appropriate agencies.

**NOTICE: NO APPLICATION WILL BE ACCEPTED AFTER DECEMBER 4th**

**Application Information:**

**1. Recipient's Name:** \_\_\_\_\_ **Copy of Drivers License or State ID**

**2. Partner/Spouse Living in Home** \_\_\_\_\_ **Copy of Drivers License or State ID**

**3. Name of Parents (other Adults) living in Home** \_\_\_\_\_

**4. Address** \_\_\_\_\_ **5. Telephone number (contact number)** \_\_\_\_\_

Are you receiving assistance from any other charitable organization? If Yes, who \_\_\_\_\_

**INCOME**

**EXPENSES**

Recipient's Employer & Phone Number	Monthly Gross:	Total Rent\$	Month	What you Pay\$
Partner's Employer & Phone Number	Monthly Gross:	Section #8 or other subsidy pays \$	Month	
SS/Disability \$		Utilities (Gas, Electric, Water) amount You pay		
SSI \$		Car Payment/Insurance - Monthly		
ADC Total Grant \$		Food - Monthly		
MDHSS				
FOOD STAMPS\$				
Other Income (Child Support etc) \$				

**Total number of people living in your home** \_\_\_\_\_ **(Include both adults and children)**

Children's Names	Age of Children	Include copy of Birth Certificate or Medicare /Medicaid Card

APPLICATION COMPLETED BY:

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Print Name

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Signature

**DID YOU:** Sign the application  
Provide copy of valid Drivers License  
Provide copy of utility bill or other bill with address  
Provide copy of pay stub.  
Provide copy of documentation that child lives at  
your home (for example, copy of State ID, school  
paperwork, family services paperwork etc.)

**Mail Application and Attachments to:**

*Wayne Goodfellows*  
35169 E Michigan Ave.  
PO 139  
Wayne, MI 48184

**Drop off to:**

*Wayne Goodfellows*  
Wayne Fire Department  
3300 S. Wayne Road  
Wayne, MI 48184