INFORMATION ABOUT PARENTS OR SPOUSES NOT LIVING IN THE HOUSEHOLD

Applicant name:	
Non-custodial Parent / Spouse Informatio	<u>n:</u>
Name:	D.O.B
Parent of:	
-	
Spouse of:	
Address:	
(if known)	
Social Security Number:(if known)	
(II KIIOWII)	
The information above is true and complete t	to the best of my knowledge.
Signature	Date