|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| First Name | MI | Last Name | Relationship to HoH | Date of Birth | Soc. Sec. # | Gender (Select from drop-down below or See Answer Key) | Race |
|  |  |  | Choose an item. |  |  | Choose an item. | Choose an item. |
|  |  |  | Choose an item. |  |  | Choose an item. | Choose an item. |
|  |  |  | Choose an item. |  |  | Choose an item. | Choose an item. |
|  |  |  | Choose an item. |  |  | Choose an item. | Choose an item. |
|  |  |  | Choose an item. |  |  | Choose an item. | Choose an item. |
|  |  |  | Choose an item. |  |  | Choose an item. | Choose an item. |

To add additional HH members, use assessor note area on last page.