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AUTHORIZATION: Federal Regulations requires the Community Development Agency to verify Unemployment Benefits of all members of a household applying for participation in the 2010 DPA Loan Program. This information will be used only to determine the eligibility status of the household.

Your prompt return of the requested information is appreciated. A copy of the applicants Authorization of Release of Information is attached.

Name of Claimant: \_\_\_\_\_

Are benefits being paid now?  Yes  No

If yes, what is the gross weekly payment? \$ \_\_\_\_\_

Date of initial payment \_\_\_\_\_

Duration of benefits \_\_\_\_\_ weeks

Is claimant eligible for future benefits?  Yes  No

If yes, how many weeks? \_\_\_\_\_ Weeks

If no, what is the termination date of benefits? \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date

WARNING: Title 18, Section 1001 of the US Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United State Government.