

--	--	--	--	--	--	--	--	--

Excluded Income

(a) Food Stamps.....	\$		00	(b) Nongovernmental Gifts	\$		00
(c) Child Support.....	\$		00	(d) Settlements (lump sum)	\$		00
(e) Personal and Student Loans.....	\$		00	(f) SSI, Social Security, Veterans or Railroad Disability (enclose documentation).....	\$		00
(g) Other (See instructions) Source	Amount	\$					00

Members of Household

[illegible]

MAIL TO: Homestead Claim, Kansas Department of Revenue, PO Box 750260, Topeka KS 66699-0260