



001 Applicant last name:	002 Applicant given name(s):	003 Applicant treaty number: 
015 Income earner last name: (1)  (2)	016 Income earner given name(s): (1)  (2)	017 Income earner treaty number: (1)                      (2)
TYPE OF ASSISTANCE		AMOUNT
<b>A: UNEARNED INCOME AND PROPERTY REVENUE</b> Attach receipts/stubs/supporting documents		
052 Insurance Payments		\$
053 Pensions		\$
054 Maintenance Agreements and Orders		\$
055 Inheritance from Estates		\$
056 Employment and Training Allowances		\$
057 Educational Funds		\$
059 Income from Assets		\$
062 Other Please specify:		\$
<b>064 Total Unearned Income</b> <span style="float:right;"><i>(Add lines 052 to 062)</i></span>		\$
<b>B: INCOME FROM EMPLOYMENT</b> <i>(includes fire-fighting, sand-bagging, respite workers for CFS agencies, respite worker for Foster parents)</i> Attach payroll stub, receipts and other supporting documents		
<b>Employer:</b> <b>Address:</b>		<b>For Pay Period:</b>
070 Gross Monthly Income (Including Honoraria, Vacation and Severance Pay)		\$
071 Less Allowable Payroll Deductions (CPP, UIC, Union, Insurance and Pension Plans)		\$
072 Income Net of Payroll Deductions (Line 070 minus line 071)		\$
073 Less Work Expense Allowances (Provide details below and add lines 74 to 76)		\$
074 Transportation (\$ )		
075 Babysitting (\$ )		
076 Other (\$ )		
Provide Explanation for work expense allowances lines 74 to 76:		
077 Income Net of Payroll Deductions and Expense Allowances (Line 072 minus line 073)		\$
078 Work Incentives (refer to Section 3.9 Page 2 of 7 in the regional manual)		\$
<b>079 Eligible Monthly Income from Employment</b> <span style="float:right;"><i>(Line 077 minus line 078)</i></span>		\$



<b>C. SELF EMPLOYMENT / BUSINESS INCOME</b> (Includes Fishing, Farming and Trapping)		
Select one method below for reporting your income and attach supporting documents:		
(Include amounts received from Freshwater Fish Marketing Corporation)		
<b>Method 1:</b>		
080	Gross Monthly Income	\$
081	Less Expenses (all self-employment or business related expenses as per supporting documents)	\$
<b>082</b>	<b>Net Monthly Income (if negative enter zero)</b> (Line 080 minus line 081)	<b>\$</b>
<b>Method 2:</b>		
083	Gross Monthly Income	\$
084	Less 50% of Gross Monthly Income	\$
<b>085</b>	<b>Net Monthly Income (if negative enter zero)</b> (Line 083 minus line 084)	<b>\$</b>
<b>Method 3:</b> Gross Yearly Income \$ _____		
086	20% of first \$1,000 of Gross Yearly Income	\$
087	30% of second \$1,000 of Gross Yearly Income	\$
088	40% of third \$1,000 of Gross Yearly Income	\$
089	100% of balance of Gross Yearly Income	\$
090	Gross Yearly Income Reported (Add lines 086 to 089)	\$
<b>091</b>	<b>Average Monthly Income</b> (Line 090 divided by 12)	<b>\$</b>
<b>D. TOTAL INCOME</b>		
<b>092</b>	<b>Total Income</b> (Add lines 064, 079, 082, 085, and 091)	<b>\$</b>

Enter line 092 on line 162 of form SD04 - Budget and Decision Form