



ASSISTANCE PROGRAM VERIFICATION DOCUMENTS CHECKLIST

Each Child in Need of Care

Review the chart below for more information about verification documents needed by each program. If you need help accessing the required documents, ask your county Job and Family Services (JFS) office for help.

THINGS TO NOTE

- Your county JFS office will provide you the Verification Checklist (JFS Form 07105)
- · Your county JFS office may ask you to provide pay stubs, utility bills, bank statements, and/or more
- Be sure to turn in all required information by the due date listed on the form
- Your county JFS office may deny your application if there are missing verification documents

* Your SNAP amount may increase if you verify these costs + Your county JFS office only verifies the citizenship of the child needing care when applying for Child Care Assistance VERIFICATION DOCUMENT					
	ASSISTANCE PROGRAM				
	SNAP	Medicaid (Families & Children)	Medicaid (Aged, Blind, or Disabled)	Child Care	Cash/ Refugee Cash Assistance
Your Social Security Number or proof that you have applied for one. Document not needed for qualified non-U.S. citizens For Medicaid, verification of an SSN is required if the individual has an SSN and the SSN cannot be electronically verified	✓	~	V		~
Permanent Resident Card ("Green Card") or other immigration documents if not a U.S. Citizen	✓	~	~		~
Proof of U.S Citizenship+ Document not needed for qualified non-U.S. citizens		~	~	+	✓
Proof of Income or any other money coming into your household (such as pay statements, tax records, award letters, child support)	√	V	V	✓	/
Most Recent Bank Statements (such as a checking or savings account)			✓		✓
Proof of Ownership of Vehicles (such as a car, truck, motorcycle, boat or RV)			√		
Proof of Current Value of Stocks/ Bonds, Certificates of Deposit, Life Insurance Policies, Trusts, Annuities			✓		✓
Proof of Identity (such as a driver's license, state ID card or passport)	✓				✓
Proof of Any Child/Dependent Care Costs	*	√			✓
Proof of Any Child Support paid for children not living with you	*	~	~	✓	~
Proof of Any Housing and Utility Costs	*		√		
Proof of Any Medical Costs for People with Disabilities or for People Who Are Over Age 60 (including prescriptions)	*		V		
Proof of Health Insurance		√	✓		
Verification of a Qualifying Activity for All Caretakers in the Household (such as school or work schedule, or self-sufficient contract)				V	
Name and Address of an Eligible Child Care Provider for					