



# DCTAG

*Supporting Documents Guide*

2021-22 award year

## Introduction

The purpose of this Supporting Documents Guide is to provide guidance and assistance to DCTAG partners who assist applicants with completing the DCTAG application process.

# Supporting Documents Checklist

After successful submission of the DC OneApp, the applicant must submit supporting documents to the DCTAG office to complete the process.

The applicant must provide:

- Domicile Verification (household income source and proof of residency from the list).
- A processed Student Aid Report (SAR).



## DCTAG Required Supporting Documents Checklist

### DOMICILE VERIFICATION

- (One of the following)
- 2020 D-40 Tax Return from DC Office of Tax and Revenue (certified or filed/processed)
  - 2020 D-40 Tax Return Extension with 2019 D-40 Tax Return from DC Office of Tax and Revenue (certified or filed/processed)
  - 2020 Electronic Tax Certification via DC OneApp
  - 12-month (Jan. – Dec. 2020) Child Support Statement
  - 12-month (Jan. – Dec. 2020) Retirement/Annuity Statement
  - 12-month (Jan. – Dec. 2020) Social Security Disability Income (SSDI) or Social Security Income (SSI)
  - 12-month (Jan. – Dec. 2020) TANF/SNAP/Food Stamp Statement
  - 12-month (Jan. – Dec. 2020) Unemployment Benefits or Worker's Compensation Disability
  - McKinney-Vento Homeless/Shelter Residency Verification Letter (dated for 2021)
  - Ward of the Court Letter (dated for 2021)

### AND

(One of the following no older than **45 days** must have the following information on it: Parent/Legal Guardian's Name, Date and Address)

- Bank or Mortgage Statement (Name, Date and Address Section)
- Pay Stub (Name, Date and Address Section)
- Utility Bill (gas, water, cable, electric, land line phone) – *no cell phone*
- Utility Letter (from landlord or on rental office letterhead, stating utilities are included in rent)

### AND

### Student Aid Report (SAR)

(Printed from [www.fafsa.gov](http://www.fafsa.gov))

- Processed Successfully

**Reminder:** DCTAG applicants who were not enrolled in a college or university during the most recent academic year, as well as new DCTAG applicants who previously attended college, or returning DCTAG applicants who missed a year or more of DCTAG eligibility may be required to submit domicile verification for previous year(s). Consult your DCTAG Counselor for more information on what you should submit.

### Questions about Supporting Documents?

Contact your DCTAG Counselor at (202) 727-2824

*Submission of the above documentation does not ensure acceptance into the DCTAG program. Your circumstances may vary, and OSSE may require additional documentation to verify eligibility.*

Document updated: Oct. 13, 2020

1050 First St. NE, Washington, DC 20002 • Phone: (202) 727-6436 TTY: 711 • [osse.dc.gov](http://osse.dc.gov)



# Supporting Documents Checklist

- When the applicant and/or parent/legal guardian submits the supporting documents, a DCTAG counselor reviews and verifies the documents.
- If all supporting documents are accurate, the DCTAG counselor will receipt the documents and deem the applicant “Eligible” for the award.

*Note: If any supporting document is missing or incorrect, the DCTAG counselor will provide the applicant with the DCTAG Required Supporting Documents Checklist indicating what is missing or needed for the applicant to be deemed “Eligible.”*

- The following pages provide examples of the supporting documents applicants can provide to complete the DCTAG application process.

# Domicile Verification

Government of the District of Columbia 2019 D-40 SUB Individual Income Tax Return

SOFTWARE DEVELOPER USE ONLY VENDOR ID #

**Personal Information**  
 Your telephone number *Mark if: Filing an amended return. See instructions.*

Your Taxpayer Identification Number (TIN) and Date of Birth Spouse's/registered domestic partner's TIN and Date of Birth (MMDDYYYY)

Your first name M.I. Last name Mark if Deceased

Spouse's/registered domestic partner's first name M.I. Last name Mark if Deceased

Home address (number, street and suite/apartment number if applicable)

City State ZIP Code +4

**Filing Status**

1 Single, Married filing jointly, Married filing separately, Dependent claimed by someone else  
 Married filing separately on same return *Enter combined amounts for lines 5 - 45. See instructions.*  
 Registered domestic partners filing jointly or filing separately on same return *Enter combined amounts for Lines 5-45. See instructions.*  
 Head of household *Enter qualifying dependent and/or non-dependent information on Schedule S.*  
 Qualifying widow(er) with dependent child. *Enter qualifying dependent information on Schedule S.*

2 *Mark if you are* Part-year resident in DC from (MMDDYYYY) to (MMDDYYYY) *See instructions.*

3 *Fill in ONLY if Full-year health coverage or exempt, see instructions*

\*Complete your federal return first -- Enter your dependents' information on DC Schedule S\*

**Income Information**

a Wages, salaries, unemployment compensation and/or tips, see instructions	a \$	.00
b Business income or loss, see instructions	Mark if loss b \$	.00
c Capital gain (or loss).	Mark if loss c \$	.00
d Rental real estate, royalties, partnerships, etc.	Mark if loss d \$	.00

**Computation of DC Gross and Adjusted Gross Income**

4 Federal adjusted gross income. From adjusted gross income lines on federal Forms 1040, 1040-SR, 1040-NR or 1040-NR-EZ. Mark if loss 4 \$ .00

Rev 09/19 RE 10052019T020002P

## D-40 Tax Return

In past years, certified copies were required, this requirement has been waved for the 2021-22 school year application cycle.

What to verify:

1. Personal Information  
Washington, DC Address
2. Part Year Resident (Will require additional documentation)



# Domicile Verification

## D-40 Tax Return

What to verify:

1. DC Taxable Income

D-40 PAGE 2  
Enter your last name  
Enter your TIN



Additions to DC Income		
5	Franchise tax deducted on federal forms, see instructions.	5 \$ .00
6	Other additions from DC Schedule I, Calculation A, Line 8.	6 \$ .00
7	Add Lines 4, 5 and 6. <span style="float: right;">Mark if loss</span>	7 \$ .00
Subtractions from DC Income		
8	Part year residents, enter income received during period of non residence, see instructions.	8 \$ .00
9	Taxable refunds, credits or offsets of state and local income tax.	9 \$ 0.00
10	Taxable amount of social security and tier 1 railroad retirement.	10 \$ .00
11	Income reported and taxed this year on a DC franchise or fiduciary return.	11 \$ .00
12	DC and federal government survivor benefits, see instructions.	12 \$ .00
13	Other subtractions from DC Schedule I, Calculation B, Line 16.	13 \$ .00
14	Total subtractions from DC income, Lines 8-13.	14 \$ 0.00
15	DC adjusted gross income, Line 7 minus Line 14. <span style="float: right;">Mark if loss</span>	15 \$ .00
16	Deduction type. Take the same type as you took on your federal return. Fill in which type: Standard or Itemized X	16
17	DC deduction amount.	17 \$ .00
18	Tentative DC taxable income. Subtract Line 17 from Line 15. <span style="float: right;">Mark if loss</span>	18 \$ .00
19	Net capital gain from sale or exchange of an eligible investment in a QPRT, from Schedule QCGI, Line 3. If D-40 Line 18 is zero or less, enter zero here.	19 \$ .00
20	<b>DC taxable income. Subtract Line 19 from Line 18. <span style="float: right;">Mark if loss</span></b>	<b>20 \$ .00</b>
21	Tentative tax. If Line 20 is \$100,000 or less, use tax tables to find the tax, if more, use Calculation I in instructions.	21 \$ .00
22	3% tax on eligible QHTC capital gains income, from Schedule QCGI, Line 4. If D-40 Line 18 is zero or less, enter zero here.	22 \$ .00
23	Add Line 21 and Line 22. Fill in X if filing separately on same return. Complete Calculation J on Schedule S.	23 \$ .00
24	Credit for child and dependent care expenses \$ .00 X .32 From Federal Form 2441, if part-year DC resident, from Line 5, DC Form 2441.	24 \$ .00
25	Non-refundable credits from DC Schedule U, Part 1a, Line 7. Attach Schedule U.	25 \$ .00
26	Total non-refundable credits. Add Line 24 and Line 25.	26 \$ .00
27	Subtract Line 26 from Line 23. If Line 23 is less than Line 26, enter zero.	27 \$ .00
28	DC Health Care Shared Responsibility See instructions. If fully covered or fully exempt, enter zero.	28 \$ 0.00
29	Total tax. Add Line 27 and Line 28.	29 \$ .00
DC Earned Income Tax Credit		
30a	Enter the number of qualified EITC children.	30a \$ .00
30b	Enter earned income amount	30b \$ .00
30c	For filers <b>with</b> qualifying children. Enter federal EIC \$ .00 X .40 Enter result >	30c \$ .00
30e	For filers <b>without</b> qualifying children. See instructions for special calculations. Enter result >	30e \$ .00
31	Property Tax Credit. From your DC Schedule H; attach a copy.	31 \$ .00

Rev 09/19 REG-1002019FDCD-09-19



All documents are examples and may vary

# Domicile Verification

## D-40 Electronic Certification

- An applicant can electronically certify the D-40 Tax Return while completing the DC OneApp under the “Certify D-40 Tax Return” link.
- The DC OneApp will ask for parent/student name, parent/student Social Security Number (SSN), and Net Refund or Total Amount Due from the D-40.
- This process is “real time” and applicant will be alerted by the DC OneApp at the end of the application if the request was successful. If the request was not successful, the DC OneApp will continue to search nightly until the taxes are processed by OTR.



# Domicile Verification

## DC FR-127: Extension of Time to File

This can be used if parent/legal guardian is/will file an extension for the tax year.

A DC FR-127 :Extension of Time to File along with a D-40 from the previous year will satisfy the D-40 requirement.

What to verify:

1. Personal Information - Washington, DC Address

The image shows a screenshot of the DC FR-127 form. A red arrow points from the text '1. Personal Information - Washington, DC Address' to the 'Address' field of the 'Prime Information' section. The form includes fields for Name, Title, Customer ID, Address, and Phone Number. The 'Spouse Information' section is also visible but mostly blank. At the bottom, there is a stamp from the D.C. Government Office of Tax and Revenue (OTR) Customer Service Administration, dated JAN 31 2017, with a signature and the text 'CERTIFIED - A TRUE COPY'.

FR-127			
Amount submitted with form	0	Source	Web
Vendor ID			Return Already Filed <input type="checkbox"/>
Tax Year Ending (Month/Year)	1/1 2016		
<b>Prime Information</b>		<b>Spouse Information</b>	
Name	STAN	Name	
Title		First Name	
M. I.		Title	
Suffix		M. I.	
Suffix		Suffix	
Id	Customer ID	Id	Social Security
00001-38225			Social Security
Address	Street 2	Unit Type	Unit
WASHINGTON	DC	20020-0000	
USA		Validate	
Phone Number			

D.C. Government  
OFFICE OF TAX AND REVENUE (OTR)  
Customer Service Administration  
JAN 31 2017  
CERTIFIED - A TRUE COPY  
CSA Employee Number CSA 29  
CSA Employee Initials [Signature]

# Domicile Verification

## Temporary Assistance for Needy Families (TANF)

What to verify:

1. Parent/Legal Guardian relationship to applicant
2. Full 12 month January-December statement
3. Any gaps in benefits will need to be explained with additional documentation

Important Note: DCTAG counselors have limited access to the DCAS system and may be able to pull TANF with parent/guardian permission.

The screenshot displays a case record for 'SNAP/Transitional SNAP'. The header includes icons for 'Head of Household', 'Parent', and 'Member', and a list of services: 'Unassisted Cash', 'Expanded Cash Payment', 'Child Support', 'Spouse Aid', and 'Spouse Aid'. Below the header is a navigation menu with options: 'Home', 'Determinations', 'Certification', 'Group', 'Parents', 'Appeal', 'Case Details', and 'Administration'. A sidebar on the left contains 'Transactions', 'Deductions', 'Inquiries', 'Over Aid Under Payment', and 'Payment Simulations'. The main area features a table with columns: 'Type', 'Amount', 'Method', 'Due Date', and 'Amount'. Below this is a list of payment records.

Type	Amount	Method	Due Date	Amount
Payment		EFF	11/1/2017	\$450.00
Payment		EFF	11/1/2017	\$450.00
Payment		EFF	11/1/2017	\$450.00
Payment		EFF	5/1/2017	\$450.00
Payment		EFF	8/1/2017	\$450.00
Payment		EFF	7/1/2017	\$450.00
Payment		EFF	6/1/2017	\$450.00
Payment		EFF	5/1/2017	\$450.00
Payment		EFF	4/1/2017	\$450.00
Payment		EFF	3/1/2017	\$450.00
Payment		EFF	2/1/2017	\$450.00
Payment		EFF	1/1/2017	\$450.00

# Domicile Verification

DC.gov (http://dc.gov) Child Support Services Division

Child Support Services Division - Online Case Lookup

Extended Payment Information

Name: \_\_\_\_\_

Case Number: \_\_\_\_\_

Distributed Date Range - From: 02/02/2015 To: 02/01/2017

Rec. Date	Disb Date	Disb Amt	Rec. Date	Disb Date	Disb Amt
01-24-17	01-25-17	217.84	04-04-16	04-05-16	272.31
01-10-17	01-11-17	217.84	03-24-16	03-25-16	273.85
12-28-16	12-29-16	216.32	03-08-16	03-09-16	272.31
12-12-16	12-13-16	217.84	02-22-16	02-23-16	273.85
12-05-16	12-06-16	217.84	02-16-16	02-17-16	272.31
11-17-16	11-18-16	217.84	01-29-16	02-01-16	222.90
10-31-16	11-01-16	212.40	01-21-16	01-22-16	218.98
10-25-16	10-26-16	216.30	01-04-16	01-05-16	218.98
10-04-16	10-05-16	272.31	12-17-15	12-18-15	218.98
09-21-16	09-22-16	278.08	10-07-15	10-08-15	218.98
09-16-16	09-19-16	272.31	09-22-15	09-23-15	223.62
09-16-16	09-19-16	273.85	09-08-15	09-09-15	220.58
08-23-16	08-24-16	272.31	09-01-15	09-02-15	328.04
07-28-16	07-29-16	273.85	08-24-15	08-25-15	218.98
07-12-16	07-13-16	272.31			
06-28-16	06-29-16	278.08			
06-14-16	06-15-16	273.85			
06-01-16	06-02-16	272.31			
05-19-16	05-20-16	273.85			
05-03-16	05-04-16	272.31			

## Child Support

What to verify:

1. Parent/Legal Guardian relationship to applicant.
2. Full 12-month. January-December statement.
3. Any gaps in benefits will need to be explained with additional documentation.
4. This document can be several pages long depending on the payment schedule.

# Domicile Verification

## Retirement /Annuity Income

What to verify:

1. Personal Information - Washington, DC Address
2. Correct 12-month period
3. Gross Benefit Amount received

**AID** OFFICE OF PERSONNEL MANAGEMENT  
**BY** RETIREMENT OPERATIONS  
P.O. BOX 45  
BOYERS, PA 16017-0045

**STATEMENT OF ANNUITY PAID**  
Copy 2A- To be filed with annuitant's state or local tax return

**2016**

OMB No. 1545-0119  
Form: 1099-R  
Distributions From  
Pensions, Annuities,  
Retirement or Profit-  
Sharing Plans, IRAs,  
Insurance Contracts, etc.

1. Gross distribution

2a. Taxable amount

4. Federal Income Tax Withheld

12. State tax withheld

13. State/Payer's state no.

12. State tax withheld  
NONE

13. State/Payer's state no.

PAYER's Federal Identification

Recipient's ID No. (Annuitant)

Account number (Retirement Claim No.)

5. Employee Contributions/  
Designated ROTH Contributions  
or Insurance Premiums

**PAID TO**

WASHINGTON, DC 20019

7. Distribution Code(s)

9b. Total Employee Contributions

14111 John 105281 (rev. 11/2011)  
This information is being furnished to the  
Department of Treasury - Internal Revenue Service

# Domicile Verification

## Social Security Income (SSI)/Social Security Disability Income (SSDI)

What to verify:

1. Correct 12-month period
2. Net Benefit received
3. Personal Information-  
Washington, DC Address

**Important Tip:** Benefit update letters are not accepted

**FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT**

**2015** • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.  
• SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name		Box 2. Beneficiary's Social Security Number
Box 3. Benefits Paid in 2015	Box 4. Benefits Repaid to SSA in 2015	Box 5. Net Benefits for 2015 (Box 3 minus Box 4)
DESCRIPTION OF AMOUNT IN BOX 3		DESCRIPTION OF AMOUNT IN BOX 4
		Box 6. Voluntary Federal Income Tax Withheld
		Box 7. Address
		Box 8. Claim Number (Use this number if you need to contact SSA.)

Form SSA-1099-SM (1-2016) **DO NOT RETURN THIS FORM TO SSA OR IRS**

# Domicile Verification

## Unemployment Income/Worker's Compensation

What to verify:

1. Personal Information - Washington, DC Address
2. Correct 12-month period
3. Unemployment Compensation received

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Unemployment compensation \$	OMB No. 1545-0120 <b>2015</b>
		2 State or local income tax refunds, credits, or offsets \$	Form 1099-G
PAYER'S federal identification number	RECIPIENT'S identification number	3 Box 2 amount is for tax year	4 Federal income tax withheld \$
RECIPIENT'S name		5 RTAA payments \$	6 Taxable grants \$
Street address (including apt. no.)		7 Agriculture payments \$	8 If checked, box 2 is trade or business income <input type="checkbox"/>
City or town, state or province, country, and ZIP or foreign postal code		9 Market gain \$	
Account number (see instructions)		10a State	10b State identification no.
			11 State income tax withheld \$

Form **1099-G** (keep for your records) [www.irs.gov/form1099g](http://www.irs.gov/form1099g) Department of the Treasury - Internal Revenue Service

**Certain Government Payments**

**Copy B For Recipient**  
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

# Domicile Verification

## Ward of the Court (WOC) Letter

- A WOC letter issued by District of Columbia's Child & Family Services Agency (CFSA), DC's foster care agency confirming Ward of the Court status.
- A WOC is a person 21 years of age or younger who is in the custodial care of the DC Child and Family Services Agency (DC's foster care system) due the absence of the parent(s)/guardian(s). WOC applicants must provide the WOC certification issued by DC's foster care system.
- WOC applicants, who have aged out of the WOC status, at age 21, must submit their own documentation including domicile and utility bill.



# Domicile Verification

## Homeless Designation Letter

The McKinney-Vento Act is designed to address the problems that homeless children and youth have faced in enrolling, attending, and succeeding in school. The McKinney-Vento Act defines “homeless children and youth” as individuals who lack a fixed, regular, and adequate nighttime residence.

Who determines a homeless designation?

- Applicants who are DCPS/DCPCS students should contact their High School Liaison.
- Applicants who are in college should contact their College/University Financial Aid Office.



### Unaccompanied Homeless Youth Verification For the Purposes of Federal Financial Aid

Re:

DOB:

**Current Mailing Address of Student** (if none, please list name, phone number, and mailing address of current contact):

**I am providing this letter of verification as a (check one):**

- A McKinney-Vento School District Liaison  
 A director or designee of a HUD-funded shelter: \_\_\_\_\_  
 A director or designee of a RHYA-funded shelter: \_\_\_\_\_  
 A financial aid administrator: \_\_\_\_\_

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by the Financial Aid Administrator is necessary. Should you have additional questions or need more information about this student, please contact me at the number listed below.

This letter is to confirm that \_\_\_\_\_ was:

Check one:

- an unaccompanied homeless youth after July 1, 2010

This means that, after July 1, 2010, \_\_\_\_\_ was living in a homeless situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the physical custody of a parent or guardian.

- an unaccompanied, self-supporting youth at risk of homelessness after July 1, 2010.

This means that, after July 1, 2010, \_\_\_\_\_ was not in the physical custody of a parent or guardian, provides for his/her own living expenses entirely on his/her own, and is at risk of losing his/her housing.

Authorized Signature: 	Date: 04/04/17
Print Name: Nicole Lee-Mwandha	Telephone Number: 202-654-6123
Title: Homeless Education State Coordinator	
Agency: DC Office of the State Superintendent of Education	



# Domicile Verification

## Other Forms of Domicile Verification

### The World Bank International Monetary Fund Employment Verifications

**The World Bank**  
INTERNATIONAL BANK FOR RECONSTRUCTION AND DEVELOPMENT  
INTERNATIONAL DEVELOPMENT ASSOCIATION

1818 H St N.W.  
Washington, D.C. 20433  
U.S.A.

Phone: (202) 473-1000  
Fax: (202) 477-6201

**Verification of Employment**

Tuesday, January 31, 2017

TO WHOM IT MAY CONCERN:

The information listed below certifies the employment status of the indicated World Bank Group staff member as recorded in official records. The staff member is exempt from U.S. Federal and State income taxes as provided in the Articles of Agreement of the World Bank Group, as incorporated into U.S. law, inasmuch as World Bank Group income is concerned.

Name:  
Title:  
Organization:  
Department:  
Duty Station: WASHINGTON DC, United States  
Appointment Type:  
Date of Appointment:

Manager

*Not valid unless signed by Manager and has been assigned a control number.*  
Number:  
Date Printed: 01/31/2017

 INTERNATIONAL MONETARY FUND  
WASHINGTON, D.C. 20431

**Verification of Employment**

April 10, 2017

To whom it may concern:

The information listed below certifies the employment status of \_\_\_\_\_ as recorded in official records.

Name:  
Title:  
Duty Station:  
Nationality:  
Visa:  
Appointment Type:  
Appointment Start Date:  
Home Address\*: \_\_\_\_\_ Washington, DC,  
20016, USA

\* Address information is maintained by employee and not the IMF.

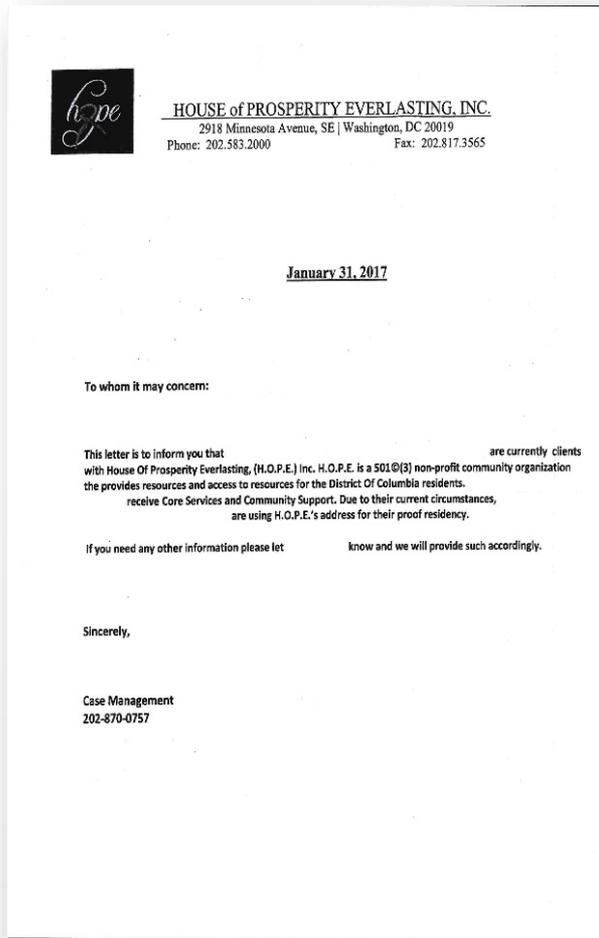
In accordance with the International Organization Immunities Act, Public Law 291, 79th Congress, non-US employees of the IMF are not subject to U.S. income taxes on their earnings from the IMF.

Sincerely Yours,

Section Chief  
Employment, Compensation, and Benefits Division  
Human Resources Department



# Domicile Verification



## Other Forms of Domicile Verification

Shelter Residency Verification

# Residency Verification

Indicates where the Applicant and Parent(s)/Legal Guardian(s) physically reside

These documents must be no more than 45 days old and reflect the applicant's name and address or the dependent applicant's parent/guardian name and address.

What to verify:

Personal Information

Washington, DC address

Date of Issue

No more than 45 days old

## Important Notes:

- Documents are in a name other than the applicant's or the dependent applicant's parent/legal guardian, a Notarized Statement must be provided by the individual on the Proof of Domicile document (including utility bill) explaining that the applicant or the dependent applicant's parent/guardian resides with the individual on the utility bill.
- DCTAG does not accept cell phone bills.

# Utility Bill



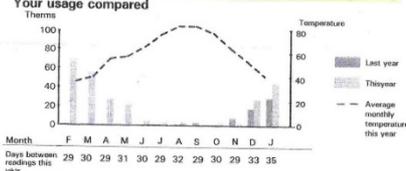
**Washington Gas**  
A WGL Company

**Gas Bill**

**Please pay**  
To avoid late payment charges, full payment must be received by the due date. Please note late fees will continue to accrue in accordance with our tariffs.

Thanks for being a valuable customer of Washington Gas. Your next meter reading date is February 2, 2017.

**Your usage compared**



For energy advice visit [washingtongasliving.com](http://washingtongasliving.com)

**Prepare for winter**  
For money saving winter tips, visit [washingtongas.com](http://washingtongas.com).

**Sign up for Budget Billing**  
The budget plan can help you manage natural gas costs. Call the automated line at 703-750-7944 to enroll today.

Account number: \_\_\_\_\_

Bill date: January 6, 2017

Period: \_\_\_\_\_

Service address:  
WASHINGTON, DC 20020

**Questions?**

[washingtongas.com](http://washingtongas.com)  
703-750-1000  
Mon - Fri: 8am - 9pm, Sat: 8am - 4:30pm

Washington Gas Customer Care  
6801 Industrial Road  
Springfield VA 22151-4294

**Your account**

Balance on your last bill \_\_\_\_\_

Payments/Credits \_\_\_\_\_

Balance brought forward \_\_\_\_\_

Current Gas Charges \_\_\_\_\_

Total Charges This Period \_\_\_\_\_

Total to pay \_\_\_\_\_

See over for details -->



**Washington Gas**  
A WGL Company

101 Constitution Avenue, NW  
Washington, DC 20080  
1-703-750-1000 • 1-800-752-7520

ADDRESS SERVICE REQUESTED

WASHINGTON DC 20020

Account Number \_\_\_\_\_

Amount due \_\_\_\_\_

Due date \_\_\_\_\_

Amount Paid \_\_\_\_\_

Check here to donate to the Washington Area Fuel Fund. Don't forget to include your donation with your payment. Visit [washingtonareafuelfund.org](http://washingtonareafuelfund.org).

Fuel Fund donation \$ \_\_\_\_\_

WASHINGTON GAS  
PO BOX 37747  
PHILADELPHIA PA 19101-5047



**Service Address**  
Washington, DC 20019-6968

**Account Number**  
Square/Suffix/Lot  
Impervious Surface Square Footage

Customer Service / Servicio Al Cliente: (202) 354-3600  
Emergencies / Emergencia: (202) 812-3400

**Bill Summary**

Billing Date: 01/23/17

Previous Balance \_\_\_\_\_

Payments as of 01/22/17 - Thank you \_\_\_\_\_

Late Fees From Prior Balance \_\_\_\_\_

Outstanding Amount Due \_\_\_\_\_

Total Current Bill \_\_\_\_\_

**Total Amount Due - Please Pay by 02/17/17**

Meter Number	Prior Read Date	Current Read Date	Number Of Days	Prior Read	Current Read	Usage (CCF)	Usage (Gallons)	Read Type
	12/19/16	01/19/17	31					ACTUAL

**CURRENT WATER AND SEWER CHARGES - RESIDENTIAL**

Watering Fee \_\_\_\_\_

Water Services 4 CCF x \$ 3.23 \_\_\_\_\_

Water Services 6 CCF x \$ 4.06 \_\_\_\_\_

Sewer Services 10 CCF x \$ 5.71 \_\_\_\_\_

Clean Rivers IAC 1 ERU x \$ 22.24 \_\_\_\_\_

**CURRENT CHARGES AND CREDITS**

DC Government PILOT Fee 10 CCF x \$.48 \_\_\_\_\_

DC Government Right of Way Fee 10 CCF x \$.17 \_\_\_\_\_

DC Govt Stormwater Fee 1 ERU x \$ 2.67 \_\_\_\_\_

Water System Replacement Fee 5/8" \_\_\_\_\_

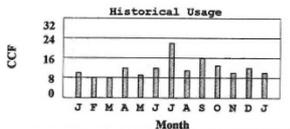
**TOTAL CURRENT CHARGES** \_\_\_\_\_

**TOTAL CURRENT BILL** \_\_\_\_\_

**IMPORTANT MESSAGES**

Your balance forward is overdue. Your service may be subject to interruption.

**Historical Usage**



Please return the portion below with your payment to ensure proper credit to your account. For payment options, see reverse.

**"WATER IS LIFE"**

Take the opportunity to help your neighbor. Make a **SPLASH** by signing up for bill roundup. We will automatically roundup your bill each month to the next highest dollar. Your pennies will help those in need to pay their water bills. This program is administered by the Greater Washington Urban League for DC Water. See reverse for more details.

Roundup     
  Roundup plus \$1.00     
  Roundup plus \$2.00

Account Number \_\_\_\_\_

Please Pay By 02/17/17

Amount Due after 02/22/17 \_\_\_\_\_

1-Time SPLASH Donation Amount Enclosed \_\_\_\_\_

Pay online at [www.dowater.com](http://www.dowater.com)

Pay By Telephone (202)354-3600

DC Water and Sewer Authority  
Customer Service Department  
P.O. Box 97200  
Washington, D.C. 20090

WASHINGTON DC 20019-6968



# Utility Bill



**Contact us:** [www.xfinity.com](http://www.xfinity.com) 1-800-XFINITY

For service at:  
WASHINGTON DC 20011

**News from Comcast**

Welcome to Comcast! You've made a great choice in your entertainment provider. This statement includes charges related to your initial installation and first month of service. Please visit [www.xfinity.com](http://www.xfinity.com) or call 1-800-XFINITY (1-800-934-6489) with any questions.

For quick and convenient ways to manage your account and pay your bill, please visit [www.xfinity.com/myaccount](http://www.xfinity.com/myaccount).

With parental controls, you can choose and manage the programming that's right for your family. Learn more at <http://parents.xfinity.com/>.

Are you a business owner? Did you know Comcast offers a full array of Internet, Voice and Video products designed to help businesses meet all of their telecommunications needs? Visit <http://business.comcast.com/> today for details about special offers and promotions.

\*Not all products and services available in all areas. Certain restrictions apply.

Account Number  
Billing Date 02/01/17  
Total Amount Due  
Payment Due by

**Monthly Statement Summary**

Previous Balance  
Payments - received by 02/01/17  
New Charges - see below  
**Total Amount Due**  
Payment Due by

**New Charges Summary**

XFINITY TV

Other Charges & Credits  
Taxes, Surcharges & Fees  
Total New Charges

Thank you for being a valued Comcast customer!

---

Detach and enclose this coupon with your payment. Please write your account number on your check or money order. Do not send cash.



PO BOX 21348  
EAGAN MN 55121-0348

WASHINGTON DC 20011-

Account Number  
Payment Due by

Total Amount Due

Amount Enclosed \$

Make checks payable to Comcast



COMCAST  
PO BOX 3005  
SOUTHEASTERN PA 19398-3005



An Exelon Company

**Your electric bill - Jan 2017**  
for the period December 30, 2016 to January 30, 2017

**Energy for a Changing World.®**

**Account number:** WASHINGTON DC 20020  
**Your service address:** WASHINGTON DC 20020  
**Bill issue date:** Jan 31, 2017

**Summary of your charges**

Balance from your last bill  
Your payment(s) - thank you  
Balance forward as of Jan 31, 2017  
New electric distribution charges - Pepco  
New electric supply charges - SOS Provider  
Pepco

**Total amount due by Feb 21, 2017**

**After Feb 21, 2017, a Late Payment Charge of \$0.84 will be added, increasing the amount due to \$84.46.**

Visit [pepco.com/dctariffs](http://pepco.com/dctariffs) and click "DC Terms and Conditions" for information on how payments are applied to balances from Pepco and any competitive supplier.

Your smart electric meter is read wirelessly. Visit My Account at [pepco.com](http://pepco.com) to view your daily and hourly energy usage.

If you are moving or discontinuing service, please contact Pepco at least three days in advance.

Information regarding rate schedules and how to verify the accuracy of your bill will be mailed upon request.

Follow us on Twitter at [twitter.com/PepcoConnect](https://twitter.com/PepcoConnect). Like us on Facebook at [facebook.com/PepcoConnect](https://facebook.com/PepcoConnect).

**How to contact us**

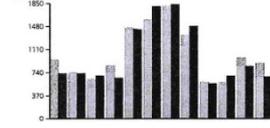
Customer Service (Mon-Fri, 7am - 8 pm) **202-833-7500**  
Hearing Impaired (TTY) **202-872-2369**  
Problemas con la factura? **202-872-4641**  
Electric emergencies & outages (24 hours) **1-877-737-2662**  
Visit [pepco.com](http://pepco.com) for service, billing and correspondence information.

Pepco is regulated by - DC Public Service Commission, dpcpsc.org  
1325 G St NW, Suite 800, Washington DC 20005, 202-626-5100

Consumer Advocate - Office of People's Counsel, opc-dc.gov  
1133 Fifteenth St NW, Washington DC 20005, 202-727-3071

**Your monthly Electricity use in kWh**

Daily temperature averages: Jan 2016: 35° F Jan 2017: 42° F



Year: 1516 1516 1516 1516 1516 1516 1516 1516 1516 1516 1516 1517  
Month: Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Jan

---

**Return this coupon with your payment made payable to Pepco**

WASHINGTON DC 20020-6022

Account number  
Total amount due by Feb 21, 2017  
Total amount due after Feb 21, 2017

Amount Paid: \$ 

PO BOX 13608  
PHILADELPHIA PA 19101



# Utility Bill

Visit [verizon.com/myverizon](http://verizon.com/myverizon)  
*Shop \* Bill Pay \* Autopay*  
*Account Changes \* Repair*  
*On Demand/Pay Per View Details*  
 Go green today - Go Paper Free

**Verizon News**

**Save With Verizon**  
 Did you know you could be eligible for savings with Verizon services? Call us at 1-888-927-8111 today to review your account.

**Faster Speeds, Plus DIRECTV**  
 Upgrade to DIRECTV® service with 205+ channels, Verizon High Speed Internet Enhanced & Home Phone for ONLY \$79.99/mo. for 1-yr. after TV rebate w/24-mo. TV agmt. Call 1-888-303-7244. Limited-time offer. Subj. to taxes & fees. Regional sports fee may apply. Terms and restrictions apply.

**Bundle Verizon & DIRECTV**  
 For a limited time, add a qualifying DIRECTV® service to your home phone & High Speed Internet bundle & save \$9.99/mo. after TV rebate w/24-mo. TV agmt. Call 1-888-304-8090 & get 3 months FREE of HBO®, STARZ®, Cinemax® & SHOWTIME®. Regional sports fee may apply. Taxes, terms & restrict. apply.

**Account Information**  
 Statement Date: 2/14/13

Phone: \_\_\_\_\_

**Account Summary**

Previous Balance	\$46.63
Payment Received Jan 31	-\$46.63
<b>Balance Forward</b>	<b>\$0.00</b>

**New Charges**

Current Activity	\$38.97
Taxes, Fees and Other Charges	\$12.41
<b>Total New Charges due by March 13, 2013</b>	<b>\$51.38</b>

**Amount Due by March 13, 2013** **\$51.38**

**Want Automatic Payment?**  
 Enroll below or at [Verizon.com](http://Verizon.com) to authorize your financial institution to deduct the amount of your monthly bill from the account associated with your enclosed check and send payment directly to Verizon. To discontinue Automatic Payment, call Verizon. Please keep a copy of this authorization.

▼

Please return remittance slip with payment.

*To enroll in Automatic Payment (Sign and date below)*

By signing above I verify that I have reviewed and accepted the terms and conditions at [verizon.com/autopayterms](http://verizon.com/autopayterms) for automatic bill payment

Account Number: \_\_\_\_\_

**New Charges Due:** Mar 13, 2013

**Amount Due: \$51.38** 021413

Make check payable to Verizon

\$ □□.□□

WASHINGTON DC 20001-1124

VERIZON  
 PO BOX 660720  
 DALLAS TX 75266-0720

\* Cell phone bills are not accepted.



# Bank or Mortgage Statement

**Wells Fargo Way2Save® Checking**  
 Account number: February 28, 2013 - March 26, 2013 Page 1 of 3

WASHINGTON DC 20019-4481

**Questions?**  
 Available by phone 24 hours a day, 7 days a week:  
**1-800-TO-WELLS** (1-800-869-3557)  
 TTY: 1-800-877-4833  
 En español: 1-877-727-2932  
 華語 1-800-288-2288 (6 am to 7 pm PT, M-F)  
 Online: wells Fargo.com  
 Write: Wells Fargo Bank, N.A. (336)  
 P.O. Box 6995  
 Portland, OR 97228-6995

**You and Wells Fargo**  
 Online Banking with Wells Fargo  
 Are you aware of all the Online Banking services we offer? We continue to add to and improve our online features to meet your needs with services such as Mobile Banking, Account Alerts, and My Spending Report with Budget Watch. Visit wells Fargo.com for more information on any of these services.

**Account options**  
 A check mark in the box indicates you have these convenient services with your account. Go to wells Fargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking  Direct Deposit   
 Online Bill Pay  Auto Transfer/Payment   
 Online Statements  Overdraft Protection   
 Mobile Banking  Debit Card   
 My Spending Report  Overdraft Service

**Activity summary**

Beginning balance on 2/28	-56.89
Deposits/Additions	0.00
Withdrawals/Subtractions	- 0.00
<b>Ending balance on 3/26</b>	<b>-56.89</b>

**Overdraft Protection**  
 This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Your Checking Package is designed to work with you to achieve financial success by providing additional benefits on the accounts and services you need. Remember, to waive the monthly service fee on your checking account, you must meet the monthly service fee waiver requirements which includes having three additional qualifying linked accounts and/or services. If you have any questions, please contact your Wells Fargo banker or call Wells Fargo Phone Bank at 1-800-TO-WELLS (1-800-869-3557).

**WELLS FARGO HOME MORTGAGE**  
 Return Mail Operations  
 PO Box 14111  
 Des Moines, IA 50306-3411

Statement date 01/28/13  
 Loan number  
 Property address

WASHINGTON, DC 20016-1814

**Customer Service** Online  
 wells Fargo.com/fm  
 1-866-278-1179 Telephone  
 1-800-222-0238  
 Correspondence Hours of operation  
 PO Box 10336 Mon - Fri 6 a.m. - 10 p.m.  
 Des Moines, IA 50306 Sat 8 a.m. - 2 p.m. CT  
 Payments Purchase or refinace  
 PO Box 11758 Newark NJ 07101 1-800-443-3429  
 We accept telecommunications relay service calls.

**Important messages**  
 Conduct a home energy audit  
 The average household spends about \$1,900 per year on energy costs. A home energy audit can help you identify ways to reduce those costs. Learn how by reading the Depart of Energy's instructions on how to conduct a do-it-yourself home energy audit. Visit energysavers.gov/your\_home/energy\_audits to learn more.

**Summary**

Payment (principal and/or interest, escrow)	\$2,363.91	Unpaid principal balance	\$416,299.61
<b>Total payment due 03/01/13</b>	<b>\$2,363.91</b>	Interest rate	3.125%
		Interest paid year-to-date	\$1,228.74
		Escrow balance	\$3,334.81

**Activity since your last statement**

Date	Description	Total	Principal	Interest	Escrow	Other
3/28	Payment	\$2,363.91	\$700.39	\$1,065.94	\$597.58	

Please detach and return with your payment.

**WELLS FARGO HOME MORTGAGE**

Loan number  
 Current monthly payment due **\$2,363.91**  
 Total payment due 03/01/13 **\$2,363.91**  
 After 03/16/13 add late charge **\$89.32**  
 Total amount due after 03/16/13 **\$2,453.23**

Check here and see reverse for address correction.

WELLS FARGO HOME MORTGAGE  
 PO BOX 11758  
 NEWARK NJ 07101-4758



All documents are examples and may vary

# Pay Stub

CO. FILE DEPT. CLOCK VCH#L. NO. 1 FDK 101061 001562 XN508 0000130778		<b>Earnings Statement</b> 	
<b>DIGITAL MANAGEMENT INC</b>		Period Beginning: 03/01/2013 Period Ending: 03/15/2013 Pay Date: 03/29/2013	
Taxable Marital Status: Single Exemptions/Allowances: Federal: MD: DC: Social Security Number:		<b>WASHINGTON DC 20012</b>	
<b>Earnings</b>		<b>Other Benefits and Information</b>	
Regular Holiday	rate hours this period	this period	total to date
<b>Gross Pay</b>			
<b>Deductions</b>		<b>Important Notes</b>	
<b>Statutory</b> Federal Income Tax Social Security Tax Medicare Tax DC State Income Tax		EFFECTIVE THIS PAY PERIOD YOUR ADDRESS HAS BEEN CHANGED.	
<b>Other</b> Checking 1 Checking 2 Dental Pretax Pos7Ea Pretax Vision Pretax Vol Life 401K			
<b>Net Pay</b>		<b>\$0.00</b>	
* Excluded from federal taxable wages			
		Pay date: 03/29/2013	
Deposited to the account of		account number transit ABA amount	
<b>THIS IS NOT A CHECK</b>			
<b>NON-NEGOTIABLE</b>			



All documents are examples and may vary

# Utility Letter

  
**OAKMONT**  
 MANAGEMENT GROUP, LLC

Rental Office: 3322 Wheeler Rd SE #12, Washington DC 20032  
 O: 202.562.0360 • F: 202.318.0387

February 22, 2017

To: Whom It May Concern

reside at

and all utilities are included in rent.

If you have any questions please feel free to contact the office via landline.

Thanks,

Oakmont Management Group, LLC  
 Assistant Property Manager

Property Incidents 888.657.1625 • Maintenance 866.429.2104  


## Utility Letter

If the utilities are included in the applicant's or parent/guardian's rent, a letter from the rental/management company stating that utility is included in the rent may be submitted.

## Utility Letter issued by DC Housing Authority.

Woodland Terrace  
 2311 Ainger PL SE, Washington, DC 20020  
 (202)645-3845

**VERIFICATION OF RESIDENCY**

04/14/2017

To Whom It May Concern:

This letter is verifying that \_\_\_\_\_ resides at \_\_\_\_\_ Washington, DC 20020. The other family members listed in the unit are as follows:

Name	Family Members

The tenant's rent is \_\_\_\_\_ if you have any questions please feel free to contact the Management Office at (202)645-3845 between the hours of 8:15am & 4:45pm, Monday through Friday.

Utility or Service	1BR	2BR	3BR	4BR	5+BR
Window Air Conditioner(s)	\$7	\$7	\$7	\$7	\$7
Washer	\$7	\$10	12	\$14	\$16
Freezer	\$5	\$5	\$5	\$5	\$5
Additional Refrigerator	\$4	\$4	\$4	\$4	\$4
Dryer	\$7	\$11	\$13	\$16	\$18

**\*\*Residents of DCHA Public Housing do not pay for Gas, Electric, or Water therefore utility allowances are no longer granted (DCHA pays utilities) and an excess utility charge is assessed to the residents account for the use of major appliances. This fee is due on the first of each month no later than the 10<sup>th</sup> in addition to the monthly rental fee.**  
**Total Excess Utility Charge \$0**  
**Total Monthly Charge for Excess Utilities \$0**

# Student Aid Report (SAR)

The Student Aid Report (SAR) is a supporting document required for the completion of the DC OneApp. The SAR is obtained by completing the Free Application for Federal Student Aid (FAFSA) as administered by the US Department of Education. The SAR provides important information regarding the applicant's need for federal financial.

Though DCTAG is not need-based, and the grant is federally funded, the US General Accounting Office recommended that all applicants complete the FAFSA to ensure compliance with all federal eligibility requirements.

The FAFSA can be completed by visiting [www.fafsa.ed.gov](http://www.fafsa.ed.gov). Applying online is generally faster and easier because there are help-guides throughout the application. Process time for online applications is one to two business days.

DCTAG accepts both the PDF and the HTML versions of the applicant's SAR as long as the SAR has been successfully processed and has an Estimated Family Contribution (EFC) calculated.

# Student Aid Report Sample (PDF)

**Federal Student Aid FAFSA**  

2018-2019 Electronic Student Aid Report (SAR)

The SAR summarizes the information you submitted on your 2018-2019 Free Application for Federal Student Aid (FAFSA).

Application Receipt Date:	10/03/2017	XXX-XX- MI 01
Processed Date:	10/04/2017	EFC: 003720 * C
		DRN:

**Comments About Your Information**  
Learn about federal tax benefits for education, including the American Opportunity Tax Credit (AOTC).

Based on the information we have on record for you, your EFC is 003720. You may be eligible to receive a Federal Pell Grant and other federal student aid. Your school will use your EFC to determine your financial aid eligibility for federal grants, loans, and work-study, and possible funding from your state and school.

Your FAFSA has been selected for a review process called verification. Your school has the authority to request copies of certain financial documents from you and your parent(s).

There is a limit to the total amount of Federal Pell Grants that a student may receive, which is the equivalent of 6 school years. Once a total amount of Pell Grant eligibility has been received, a student can no longer receive Pell Grant aid.

WHAT YOU MUST DO NOW (Use the checklist below to make sure that all of your issues are resolved.)

We could not send your name to Selective Service as you requested because you did not give us enough information, you are outside the age range for registration, or you did not sign your form. If you are male and at least 18 but not yet 26, to receive aid you must do one of the following: (1) answer "Male" to Item 21 and "Register Me" to Item 22 by clicking "Make FAFSA Corrections" on the "My FAFSA" page and also provide information for Items 1, 2, and 3; (2) complete a Selective Service registration form at your local post office, or (3) register online at <https://sss.gov>. If you are a male who is age 26 or older, you must check the Selective Service Web site at <https://sss.gov>. Select "registration info" and then "Who Must Register?" for more information. Contact Selective Service at 847-688-6888 only after reviewing the SSS Web site information. You must resolve your registration status before you can receive federal student aid. You are exempt from registering if born before 1960.

If you need to make corrections to your information, click "Make FAFSA Corrections" on the "My FAFSA" page using your FSA ID. If you need additional help with your SAR, contact your school's financial aid office or click the "Help" icon on the FAFSA home page. If your mailing address or e-mail address changes, you can make the correction online.

Based on your EFC of 003720, you may be eligible to receive a Federal Pell Grant of up to \$2,170 for the 2018-2019 school year provided you have not met or exceeded the lifetime limit established for the Federal Pell Grant program.

What to verify:

EFC has been calculated

C Flag Issues -See What You Must Do Now Section for corrections or issues that need addressed.

Selected for Verification- Provide any documents requested by your college/university to your college/university.

What You Must Do Now will addresses C Flag corrections or issues that need addressed.

Pell Grant Eligibility

# Citizenship Documentation

Citizenship documents are required for applicants only if the applicant's SAR has flagged for additional documents by the US Department of Homeland Security or Social Security Administration. The front page of the SAR will outline what is needed.

**DCTAG DOES NOT accept the Employment Authorization Card as a form of Citizenship Documentation.**





# Non-Citizen Nationals

US Passport can be used to document citizenship for individuals born abroad. For a non-citizen, it must be stamped “Non-citizen National.” (Note: a passport issued by another country may be used to document permanent resident status if it has the endorsement ‘Processed for I-551’ and has a valid expiration date.)



Certificate of Citizenship is issued to persons were born abroad to, or adopted by US parent(s), who became citizens through naturalization.



Certificate of Naturalization is issued to naturalized US citizens.



# Permanent Resident/Other Eligible Non-Citizen

I-94 Arrival-Departure Record acknowledges a permanent resident's status. This document must be stamped "Processed for I-55" with expiration date or "Temporary Form I-551." For other Eligible Non-citizens, the document must be stamped as Refugee, Asylum Status, Conditional Entrant (before April 1, 1980), Parolee, or Cuban-Haitian Entrant.

Departure Number  
742831632 01

U.S. IMMIGRATION  
202 955 177

1  
SEP 13 1991

Immigration and  
Naturalization Service

I-94  
Departure Record

ADMITTED B-2  
UNTIL MARCH 12, 1992

18. Family Name  
DOE

19. First (Given) Name  
JOHN

20. Birth Date (DD/MM/YY)  
01/01/91

21. Country of Citizenship  
ENGLAND

See Other Side STAPLE HERE

**Warning** - A nonimmigrant who accepts unauthorized employment is subject to deportation.

**Important** - Retain this permit in your possession; you must surrender it when you leave the U.S. Failure to do so may delay your entry into the U.S. in the future. You are authorized to stay in the U.S. only until the date written on this form. To remain past this date, without permission from immigration authorities, is a violation of the law.

**Surrender this permit when you leave the U.S.:**

- By air or sea, to the transportation line;
- Across the Canadian border, to a Canadian Official;
- Across the Mexican border, to a U.S. Official.

Students planning to return the U.S. within 30 days to return to the same school, see "Arrival-Departure" on page 2 of Form I-20 prior to surrendering this permit.

Record of Change

Port: \_\_\_\_\_

Date: \_\_\_\_\_

Carrier: \_\_\_\_\_

Flight #/Ship Name: \_\_\_\_\_

Departure Record

For sale to the Department of Documents, U.S. Government  
Washington, D.C. 20482

Form CBP I-94A is the computer-generated for that replaced the Form I-94A.

DEPARTMENT OF HOMELAND SECURITY  
U.S. Customs and Border Protection

OMB No. 1545-0047

Departure Record  
Admission Number  
123456789 01

SEP 13 2006  
Class J1 D/S  
Until

18. Family Name \_\_\_\_\_

19. First (Given) Name \_\_\_\_\_

20. Birth Date (DD/MM/YY) \_\_\_\_\_

21. Country of Citizenship \_\_\_\_\_

See Other Side STAPLE HERE

CBP Form I-94



# Additional Supporting Documents

These additional documents may be requested to supplement the main supporting documents.

Veterans Affairs Benefits

Adoption Decree/Custody Document

Death Certificate

Divorce Decree

Notarized Letter

Selective Service Registration

# Contact Us

For more information, call (202) 727-2824  
Monday – Friday, 8:30 a.m.- 5 p.m.

