<u>Attachment A</u> <u>Economic Development Program/Loan Program - Project Beneficiary</u> Profile



West Allis is able to offer this service/program through a grant from the federal government. One requirement of this grant is that the City keeps track of all the individuals this program assists by family size and income level. To help with this requirement, we ask for your assistance. Please complete the information required below so that we may track the individuals we are assisting through this program. Please be aware the information is completely confidential and will not be released but is for record keeping and required federal reporting purposes only.

Thank you for your cooperation. Name: Phone #:	Address:
RACE: (You MUST mark one)	
□ White	Black/African American
□ Asian	American Indian/Alaskan Native
Native Hawaiian/Other Pacific Islander	□ American Indian/Alaskan Native and White
□ Asian & White	□ Black/African American and White
□ American Indian/Alaskan and Black/African	
Other Multi-Racial	
ETHNICITY: (You <u>MUST</u> mark one) \Box Hispanic	□ Non-Hispanic

Family Size and Income Levels (2020): (Please circle one)

Below you will find a chart listing the various income levels. Find your family* size along the top of each column. Then circle the lowest income ** amount which exceeds your family income.

Income Level	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person
Extremely Low	17,650	20,150	22,650	25,150	27,200	29,200	31,200	33,200
Low	29,350	33,550	37,750	41,900	45,300	48,650	52,000	55,350
Moderate	46,950	53,650	60,350	67,050	72,450	77,800	83,150	88,550
Non- Low/Moderate	46,951+	53,651	60,351+	67,051+	72,451+	77,800+	83,151	88,551

Female Head of Household – (please circle) Yes or NO

* "Family" means all persons residing in the same household.

** "Income" means that of all members of the family over 18 years of age. However, unearned income (such as income from trust funds or investments) must be included regardless of the age of the beneficiary. Income includes wages, pensions, social security benefits, rents, and interest from any asset.

I understand that the information provided in this certification is subject to verification by the City of West Allis and/or HUD.

Signature

Economic Development Project/Loan Program

Employee Income Data Form

Employer:

After the new and current employees have completed the "Employee Income Certification Form," please provide the following information for all employees (new, current, retained, terminated) that were hired as a result of the Economic Development Project/Loan Program project.

Nan	ne and Address of	Employer:	
Nan	ne:		
Add	ress:		
City		State:	Zip:
Nan	ne and Address of	Employee:	
Nan	ne:		
Add	lress:		
City		State:	Zip:
Emj	ployee Identificati	on Number (or S.S.#):	
Job	Title:		
Date	e Hired:		
		pplicable:	
Date	e Retained:		
Date	e Replacement Hi	red:	
٨٧٥	raga Haurs Par W	/eek Worked:	
	_Full time or		
Wh	en hired. was the	employee LMI (Low and Moderate Incom	e)?
	No		
Δre	there employer spo	onsored healthcare benefits?	
Alt	unere employer spe		
Wer	e you unemployed	prior employment?	
Cat	egory of work (Ple	ase Circle One)	
	· · ·	Craft Workers (skilled)	
	hnicians	Operators (Semi skilled)	
Sale		Laborers	
Offi	ce & Clerical	Service Worker	