



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

CLIENT ID:

Bürookraam:

Kōm ej aikuj melele kein ñan kile ñe kwomaroñ bōk _____:

Ñe kwōj aikuj jipañ, ak aikuj elap lok iien ñan letok juon iaan men kein, kwōn jouj im kirtok ilo _____.

Ñe kwōj jab letok melele in, remaroñ jab watoke peba in application in jipañ ñe aṃ.

Opij in Jerbal in Jipañ an Jukjukinpād

Nōm̄ba in telpon: _____