

CNS Paragraph Form

Date: 01.08.15

Program Area **03** (01=PA, 02=FS, 03=MA, 04=HP)
Paragraph Number **R8305**
Version Number **00007**
Effective Date **2015** (YYMMDD)
Title **Address**
Comment **Question 1**
Reason Code **Z61, Z85, Z62, Z86, and Z49**

A) FOR USE WITH CT 20 WHEN RVI CODE EQUALS 1 OR 4

You last reported you live at:

XX
XX
XX

Is this still where you live?

- Yes
- No. I live at:

House #	Street	Apt. #
City	State	Zip

Send proof of your new address.

Check here if homeless.

If you do not receive mail where you live, please write your mailing address below:

House #	Street	Apt. #	PO Box#
City	State	Zip	

My telephone number is: _____ Home Cell Work Other

Another phone number where I can be reached is: _____ Home Cell Work Other

-E-

B) FOR USE WITH CT 20 WHEN RVI CODE EQUALS 2, 3 OR 9

You last reported you live at:

XX
XX
XX

Is this still where you live?

[_] Yes

[_] No. I live at:

House # Street Apt. #

City State Zip

Check here if homeless.

If you do not receive mail where you live, please write your mailing address below:

House # Street Apt. # PO Box#

City State Zip

My telephone number is: _____ Home Cell Work Other

Another phone number where I can be reached is: _____ Home Cell Work Other

~S/

B) FOR USE WITH CT 20 WHEN RVI CODE EQUALS 2, 3 OR 9

La ultima vez usted reporto que vive en el:

XX
XX
XX

Todavia vive en esta direccion?

- Si
- No. Yo vivo en el:

No. de Casa	Calle	Apto. No.
Ciudad	Estado	Codigo Postal

Marque aqui si es una persona sin hogar.

Si no recibe correspondencia en la direccion donde vive, escriba la direccion de correo a continuacion:

No. de Casa	Calle	Apto. PO Box#
Ciudad	Estado	Codigo Postal

Mi numero de telefono es el: _____ Casa Celular Trabajo Otro

Tambien se me puede localizar en el siguiente numero: _____ Casa Celular Trabajo Otro