

TYLER COUNTY NUTRITION CENTER:

DATE: Sept 4, 2024

EXERCISE

ACTIVITY Seniors IN Motion

1	Barbara Hight	14	27
2	Catherine Devar	15	28
3	May Read	16	29
4	Shirley Roberts	17	30
5	Michelle Opner	18	31
6	Syd Smith	19	32
7	Lesley Beart	20	33
8	Stella Wagner	21	34
9	Judith Williams	22	35
10	Judith Williams	23	36
11		24	37
12		25	38
13		26	34

(2)

TYLER COUNTY NUTRITION CENTER:

DATE: 9-6-24

ACTIVITY Seniors In Motion

EXERCISE

1	BERRY	14	27
2	Gray Peter	15	28
3	Reby West	16	29
4	Dale Waring	17	30
5	Stewart	18	31
6	HAROLD Wiggins	19	32
7	Lyette Friesloth	20	33
8	Shirley Roberts	21	34
9	Arthur Davis	22	35
10	Alma Sims	23	36
11	Mary Lee Reed	24	37
12	Barbara Hight	25	38
13		26	34

(10)

TYLER COUNTY NUTRITION CENTER:

DATE: 9-9-24

# EXERCISE

ACTIVITY Seniors In Motion

1	HAROLDE Williams	14	27
2	Barbara Hight	15	28
3	Terena Keyser	16	29
4	Berley Keitt	17	30
5	Bernice Sims	18	31
6	Ernal Hitts	19	32
7	Thyette Fairclerk	20	33
8	Stella Payne	21	34
9		22	35
10		23	36
11		24	37
12		25	38
13		26	34

8

TYLER COUNTY NUTRITION CENTER:

DATE:

9-11-24

EXERCISE

ACTIVITY Seniors In Motion

1	Teresa Reyer	14	27
2	Shelley Finckel	15	28
3	Wanda Sims	16	29
4	Barbara Hight	17	30
5	Michelle Jones	18	31
6	Shirley Roberts	19	32
7	Byrdell Flotts	20	33
8	Suzanne Jones	21	34
9	Anthony Jones	22	35
10	Shirley R. Ellis	23	36
11	Frank (Frank)	24	37
12	HAROLD E. Williams	25	38
13		26	34

12

TYLER COUNTY NUTRITION CENTER:

DATE: 9-13-24

ACTIVITY: EXERCISE

Walk with Ease

1	HAROBEL Williams	14	27
2	Catharin Mason	15	28
3	Michelle Jones	16	29
4	Rudine Hoyt	17	30
5	Bill Brant	18	31
6	Billy Wynn	19	32
7	Shirley Robert	20	33
8	Smiley Taylor	21	34
9	Cathy Freeman	22	35
10		23	36
11		24	37
12		25	38
13		26	34

TYLER COUNTY NUTRITION CENTER:

DATE:

ACTIVITY Walk w/ Band

EXERCISE

9-16-24

1	Charge Canyon	14	27
2	Terresa Meyer	15	28
3	Harold E. Williams	16	29
4	Patricia Davis	17	30
5	Barbara Hight	18	31
6	Christina Davis	19	32
7	Lyndy Pitts	20	33
8	Michelle Green	21	34
9	Stephanie Fursick	22	35
10	Shelton Rogers	23	36
11	Shirley Roberts	24	37
12	Jacobi Williams	25	38
13		26	34

12

TYLER COUNTY NUTRITION CENTER: DATE: 9-18-2024

ACTIVITY Exercise 9:30 AM

# EXERCISE

1	Cathy Freeman	14	27
2	HAROLBEWILLIAMS	15	28
3	Sheryl Cawley	16	29
4	Cathryn Decker	17	30
5	Alanna Davis	18	31
6	Shirley Roberts	19	32
7	Ruby Scott	20	33
8	Michelle Jones	21	34
9	Barbara Hight	22	35
10	Terna Davidson	23	36
11	Sybil Hutto	24	37
12	Jackie Williams	25	38
13	Dorothy Winters	26	34

(14)

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY Servers In Motion

DATE: 9-20-24

EXERCISE

1	HAROLD BENJAMIN	14	27
2	Cheryl Crowley	15	28
3	Barbara Hight	16	29
4	Mary Reed	17	30
5	Ruby Hight	18	31
6	Richard Mitchell	19	32
7	Glenn Sims	20	33
8	Shirley Roberts	21	34
9	Leola Mae Deane	22	35
10	William Taylor	23	36
11	Dorothy Williams	24	37
12		25	38
13		26	34



EXERCISE

1	Catherine Deane	14	Henry Sells	27
2	Cheryl Cawley	15		28
3	Teresa Meyer	16		29
4	Michelle Jones	17		30
5	Mary Eason	18		31
6	Shirley Rahn	19		32
7	May Reed	20		33
8	Barbara Hight	21		34
9	Sylvia Sparks	22		35
10	Reiley Skelt	23		36
11	Dorothy Wynn	24		37
12	Bridget Reese	25		38
13	Laney Covert	26		34

ACTIVITY: Big Pops In Motion

1	Cheryl Canley	14	27
2	Carlene Deven	15	28
3	SM Williams	16	29
4	Shelby Robinson	17	30
5	Michelle Jones	18	31
6	Rosanna Copeland	19	32
7	Shirley (Plym)	20	33
8	Jackie Chapman	21	34
9	Lesley Abbott	22	35
10	Mary Rose	23	36
11	Bridget Rose	24	37
12	Nancy Cassin	25	38
13	Stella Taylor	26	34

TYLER COUNTY NUTRITION CENTER:  
 ACTIVITY EXERCISE

DATE: 9-30-2024

1	Teresa Rupp	14	27
2	Michelle Jones	15	28
3	Jann MacLainish	16	29
4	Brenda Ryan	17	30
5	April Abbott	18	31
6	Debbie Leary	19	32
7	Donna Jones	20	33
8	Stella Rupp	21	34
9	Leanna Spauld	22	35
10		23	36
11		24	37
12		25	38
13		26	34

(9)

**Agency:** Deep East Texas Area Agency on Aging  
**Site:** Tyler County - C1  
**Service:** Physical Fitness  
**Fund Identifier:** Local Cash  
**Default Unit Rate:** \$11.55  
**Provider:** Tyler County Nutrition Center  
**Fund Identifier:** Title III-B  
**Default Unit Rate:** \$11.55

9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30
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**Barnett, David A**

1																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Cauley, Cheryl P**

2																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Conner Jr, Leonard (Burtis) B**

3																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Cravy, Julie B**

4																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Davidson, Irma**

5																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Deason, Catherine**

6																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Evans, Judith M**

7																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

**Faircloth, Lynette A**

8																														
	Service: Physical Fitness																													
	Fund Identifier: Local Cash																													
	Subservice: (None)																													

9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30
					3				1		2				3		3		3		2		2		2		2		2	

**LEGEND** M/T: Monthly Total  : Week day  : Weekend day  
 (4) (19) (8) (4)

9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30
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9	<b>Freeman, Cathy A</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
10	<b>Harman, Becky L</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
11	<b>Harman, Jimmy E</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
12	<b>Hext, Ruby</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
13	<b>Hight, Barbara</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
14	<b>Hillhouse, Shirley A</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
15	<b>Hutto, Sybil</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
16	<b>Johnston, Carolyn J</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											
17	<b>Jones, Michelle B</b>																											
	Service: Physical Fitness																											
	Fund Identifier: Local Cash																											
	Fund Identifier: Title III-B																											
	Subservice: (None)																											

9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30	
18																															
	Kindie, Margie A Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
19																															
	Leathem, Nelda J Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
20																															
	Leathem, William R Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
21																															
	Mitchell, Richard Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
22																															
	Mitchell, Sammy L Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
23																															
	Mott, Judy A Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
24																															
	Read, Mary L Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
25																															
	Reyes, Teresa D Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														
26																															
	Roberts, Shirley A Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																														

(2)

(3)

(10)

(5)

(1)

(18)

	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30
27																														
	<b>Royer, Suellen</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
28																														
	<b>Sims, Donna</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
29																														
	<b>Stewart, Carla R</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
30																														
	<b>Tidwell, Deanna L</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
31																														
	<b>Williams, Harold E</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
32																														
	<b>Williams, Jackie B</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
33																														
	<b>Winginger, Debby J</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
34																														
	<b>Yarbrough, Meredith A</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													
35																														
	<b>Wilk, Kimberly</b> Service: Physical Fitness Fund Identifier: Local Cash Subservice: (None)																													

9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30		
36	Ryan, Irish																															
	Service: Physical Fitness																															
											X																					

37	Eason, Nancy																																
	Service: Physical Fitness																																

38	Ellis, Gerry																																	
	Service: Physical Fitness																																	

39	Reese, Bridget																																		
	Service: Physical Fitness																																		

40	MacTavish, Joann																																	
	Service: Physical Fitness																																	

41	Ryan, Brenda																																	
	Service: Physical Fitness																																	

42																																			
	Service: Physical Fitness																																		

43																																			
	Service: Physical Fitness																																		

44																																			
	Service: Physical Fitness																																		



9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30			

Handwritten notes: circled numbers 1, 4, 2, 2, a and other markings.



9/2024	Sun 1	Mon 2	Tue 3	Wed 4	Thu 5	Fri 6	Sat 7	Sun 8	Mon 9	Tue 10	Wed 11	Thu 12	Fri 13	Sat 14	Sun 15	Mon 16	Tue 17	Wed 18	Thu 19	Fri 20	Sat 21	Sun 22	Mon 23	Tue 24	Wed 25	Thu 26	Fri 27	Sat 28	Sun 29	Mon 30
45																														
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Local Cash</b>																													
	Subservice: <b>(None)</b>																													
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Title III-B</b>																													
	Subservice: <b>(None)</b>																													
46																														
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Local Cash</b>																													
	Subservice: <b>(None)</b>																													
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Title III-B</b>																													
	Subservice: <b>(None)</b>																													
47																														
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Local Cash</b>																													
	Subservice: <b>(None)</b>																													
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Title III-B</b>																													
	Subservice: <b>(None)</b>																													
48																														
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Local Cash</b>																													
	Subservice: <b>(None)</b>																													
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Title III-B</b>																													
	Subservice: <b>(None)</b>																													
49																														
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Local Cash</b>																													
	Subservice: <b>(None)</b>																													
	Service: <b>Physical Fitness</b>																													
	Fund Identifier: <b>Title III-B</b>																													
	Subservice: <b>(None)</b>																													

49 Consumers Roster Summary Total:

Roster Summary:

9/24/24

TYLER COUNTY NUTRITION CENTER: DATE:

ACTIVITY Grants Rachel

1	<i>Shelley Foyen</i>	14	27
2	<i>Catherine Person</i>	15	28
3	<i>Kenneth Sedwell</i>	16	29
4	<i>Bucky Harman</i>	17	30
5	<i>Judy Evans</i>	18	31
6		19	32
7		20	33
8		21	34
9		22	35
10		23	36
11		24	37
12		25	38
13		26	34

5

# Tye Dye Thurs. 9/26

Please sign up if you  
plan on doing a shirt.

- |                            |                    |
|----------------------------|--------------------|
| 1. Barbara Hight           | 13. Jessica Alonso |
| 2. Suellex Royce           | 14. Irina Conner   |
| 3. Donna Sims              | 15. Ericka Ramirez |
| 4. Catherine Deuss         | 16.                |
| 5. May Read                | 17.                |
| 6. Carol Richoy            | 18.                |
| 7. <del>Sybil Skillo</del> | 19.                |
| 8. carla Stewart           | 20.                |
| 9. Reiley West             | 21.                |
| 10. Pat Murders            | 22.                |
| 11. Annie Braddock         | 23.                |
| 12. Becky Harmon           | 24.                |

(15)

ACTIVITY Bingo

1	Mickelle Jones	14	Nelda Leatham	27
2	Shirley Roberts	15	Lenny Sellers	28
3	Catherine Spear	16	Margie Allen	29
4	Barbara Hight	17	Jackie Williams	30
5	Carolee Blunt	18	Michelle Taylor	31
6	Deanne Sims	19	Mary Eason	32
7	Debra May	20	Trishy Carson	33
8	Judy Mott	21	Lena Con	34
9	Sylvia Skelton	22	Ruby Skelton	35
10	Ruby Turner	23	Mary Reed	36
11	Jimmy "	24	Deanne Jenkins	37
12	Patricia Munkel	25	Sandy Bluffe	38
13	Gene Spadoff	26		34

TYLER COUNTY NUTRITION CENTER:

DATE: 9-9-24

Bingo

ACTIVITY Bingo

1	Cathy Schuster	14	Reann Jackson	27
2	Shirley Faircloth	15	Bobby Harmer	28
3	Donna Sims	16	Beryl Sless	29
4	Barbara Hight	17	Margaret Allen	30
5	Ruby Stewart	18	Judith Evans	31
6	Mary Reed	19	Jackie Williams	32
7	Mary Soren	20		33
8	Shellen Taylor	21		34
9	Sylvia Smith	22		35
10	Margaret Kinkle	23		36
11	Jan Blackmer	24		37
12	Helena Kirkwood	25		38
13	Nelda Deaton	26		34

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TYLER COUNTY NUTRITION CENTER:  
 ACTIVITY Bingo

DATE: 9-11-2024

1	<i>Carolyn Johnson</i>	14	<i>Dorcas Jewell</i>	27
2	<i>Stella Kasper</i>	15	<i>Sam Blackmon</i>	28
3	<i>Werna Jim</i>	16	<i>Helen Kirkwood</i>	29
4	<i>Barbara Hight</i>	17	<i>Jermiah Kirkwood</i>	30
5	<i>Trish Ryan</i>	18	<i>Catherine Deas</i>	31
6	<i>KIMBERLY KELLS</i>	19	<i>Jackie Williams</i>	32
7	<i>Suzette Frichest</i>	20	<i>Carol Risley</i>	33
8	<i>Michelle Peters</i>	21	<i>Leona P</i>	34
9	<i>Shirley Roberts</i>	22	<i><del>Sally Roberts</del></i>	35
10	<i>Sylvia Smith</i>	23		36
11	<i>Heena Deaton</i>	24		37
12	<i>Becky Hamman</i>	25		38
13	<i>Benny Ellis</i>	26		34

22

TYLER COUNTY NUTRITION CENTER:

DATE:

9/13/24

ACTIVITY

*James*

1	<i>Sullivan Taylor</i>	14	27
2	<i>Shelby Roberts</i>	15	28
3	<i>Daly Williams</i>	16	29
4	<i>BB Myers</i>	17	30
5	<i>Deanna Skidwell</i>	18	31
6	<i>Wanna Tom</i>	19	32
7	<i>Kelley Idett</i>	20	33
8	<i>Catherine Cleason</i>	21	34
9	<i>Michelle Jones</i>	22	35
10	<i>Judy Mitt</i>	23	36
11	<i>Emie Spaldok</i>	24	37
12	<i>Phricia Meadows</i>	25	38
13		26	34

12

BINGO

1	Isly Winger	14	Shirley Faircloth	27	Margie Allen
2	Margie Kestler	15	Genevieve	28	Annalynne
3	Norma Leno	16	Cheryl Cawley	29	Johnnie Leno
4	Judith Evans	17	Antonie Devo	30	Shirley Leno
5	Byllie Smith	18	Judy Mott	31	
6	Michelle Jones	19	Ernie Broadbent	32	
7	Arlene Kestner	20	<del>Shirley</del>	33	
8	Patricia	21	Sam Blackmon	34	
9	Pat Muckler	22	Helen Kirkwood	35	
10	Frank Williams	23	Shirley Sheppard	36	
11	Barbara Hight	24	Leann Bowers	37	
12	Julie Hight	25	Eleven Allen	38	
13	Judy Harmon	26	George Ellis	34	



TYLER COUNTY NUTRITION CENTER:

DATE:

9-18-2024

ACTIVITY Bingo 10:00 AM

1	Catherine Devo	14	Cheryl Cawley	27
2	Michelle Berger	15	Shirley Bradback	28
3	Kerley Hight	16	Barbara Hight	29
4	Wenona Jim	17	Jean Collins	30
5	Margaret Knudde	18	Roberta	31
6	May Grant	19	I. Davidson	32
7	Carol Johnston	20	Carol Reberg	33
8	Betty Harman	21	D. K. ...	34
9	Betty Harman	22		35
10	Betty Harman	23		36
11	Shirley Hight	24		37
12	Shirley Williams	25		38
13	Patricia ...	26		34

(21)

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY

DATE: 9-23-24

Bingo

1	Catharine Deane	14	Henry Ellis	27
2	Ronald Sims	15	Barbara Hight	28
3	Candice Johnson	16	Ann Marie Maddox	29
4	Henry Eason	17	Abigail Mudders	30
5	Brigitte Leese	18	Ruby Holt	31
6	Margaret Kunkle	19	Wm. Ray Lead	32
7	Michelle Jones	20	Helena Kirkwood	33
8	Shirley Bell	21	Jean Blackman	34
9	Debra Gray	22	Reannet Howell	35
10	Willie Ruff	23	Pauley Strong	36
11	Helda Deaton	24	Lesolad Lane	37
12	Bill Deaton	25	Angel Purvis	38
13	Stella Deane	26	Tennie Purvis	34

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TYLER COUNTY NUTRITION CENTER:

DATE:

9/6/24

ACTIVITY

Games

1	Suzanne Boyer	14	27
2	Dolly Humphreys	15	28
3	Julie Gray	16	29
4	Thomas Darr	17	30
5	Ruby West	18	31
6	Norma Jones	19	32
7	Mary Ford	20	33
8	Diana Hedwell	21	34
9	Shirley Roberts	22	35
10	Barbara Hight	23	36
11	Judy Moff	24	37
12	Myra Murders	25	38
13	Mae Braddock	26	34

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY

DATE:

9-18-24

Games

1		14	27
2	Shelley Reaven	15	28
3	Deanna Sykes	16	29
4	Catherine Devo	17	30
5	Dorinda Sims	18	31
6	Mary Powell	19	32
7	Bessie Kelly	20	33
8	Mary Kay Kendall	21	34
9	Shirley Ross	22	35
10	Michelle Davis	23	36
11	Judy Mott	24	37
12	Johanna Munders	25	38
13	Janice Bradshaw	26	34

(12)

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY \_\_\_\_\_

DATE: 9-28-24  
Banner

1	Carlton Doss	14	27
2	Julie Gray	15	28
3	Shirley Reed	16	29
4	Barbara Hight	17	30
5	Deby <del>Winters</del>	18	31
6	Sue Winters	19	32
7	Judy Mott	20	33
8	Robert Muebers	21	34
9	Morie Broadbent	22	35
10	Alma Sims	23	36
11	Reuby Holt	24	37
12	Mary Reed	25	38
13	Judy Evans	26	34

(13)

ACTIVITY Bingo

1	<del>Cathy D</del>	14	Bridget Keenan	27	Carol Keenan
2	Carol Keenan	15	William Leatham	28	Cheryl Cawley
3	Yvonne Bryan	16	Yvonne Leatham	29	Shirley Roberts
4	Shirley Roberts	17	Yvonne Spoor	30	
5	Shirley Roberts	18	Barbara Hight	31	
6	Shirley Roberts	19	Suzie Hight	32	
7	Shirley Roberts	20	Judy Evans	33	
8	Shirley Roberts	21	Jackie Hight	34	
9	Shirley Roberts	22	Rosanna Copeland	35	
10	Shirley Roberts	23	Leona Jones	36	
11	Shirley Roberts	24	Shirley Hight	37	
12	Mary Ruth	25	Henry Ellis	38	
13	Ruby Hight	26	Margaret Allen	34	
	Joanna McTavish		Brenda Ryan		

30

TYLER COUNTY NUTRITION CENTER:

DATE:

9-30-2024

ACTIVITY Brings

1	Margaret Lunde	14	Joann MacTavish	27
2	Aleane Linn	15	Brenda Ryan	28
3	Carolyn Schmitt	16	Martha Wiselme	29
4	Dakota Linn	17	Sybil Shatto	30
5	Ruby West	18	Juday Evans	31
6	Alicia Rosen	19		32
7	Bernadette Lunde	20		33
8	BO Lunde	21		34
9	Helena Kirkwood	22		35
10	Jean Blackmon	23		36
11	Barby Harmon	24		37
12	Henry Miller	25		38
13	Margie Allen	26		34

10

TYLER COUNTY NUTRITION CENTER: DATE: 9-27-24

ACTIVITY Cards

1	Colleen Davis	14	Jenny Harman	27
2	Debra Gray	15	Grady Reed	28
3	Debra Gray	16		29
4	Deanna Jacobs	17		30
5	Dorothy Manning	18		31
6	Ruby Holt	19		32
7	Deanne Davis	20		33
8	Barbara Hight	21		34
9	Shirley Robb	22		35
10	Judy Matt	23		36
11	Jenny Harman	24		37
12	John Muckler	25		38
13	Ruby Harman	26		34

15



TYLER COUNTY NUTRITION CENTER:

DATE:

9-3-24

ACTIVITY

Dominoes

	NAME	INITIAL
1	EVA FOXWORTH	
2	CATHY FREEMAN	
3	GEORGE ALVARADO	<i>GA</i>
4	BILL FAIRCLOTH	<i>BF</i>
5	MAX HILL	<i>MH</i>
6	DAVID MCALISTER	<i>DM</i>
7	GENE ROBINSON	<i>GR</i>
8	LARRY AL JORDAN	
9	KEN RAIMIER	
10	CHARLES DAVIS	<i>CD</i>
11	LEONARD CONNER SR.	<i>LC</i>
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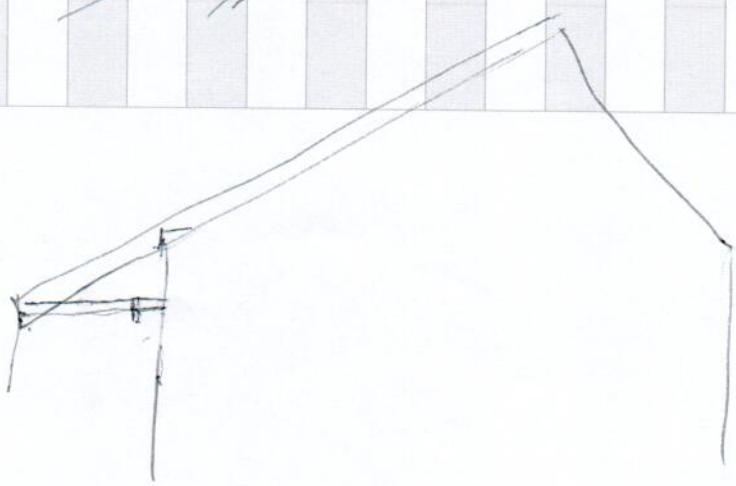
(1)

TYLER COUNTY NUTRITION CENTER: DATE:

ACTIVITY 9-4-24

*Dominicks*

	NAME	INITIAL
1	EVA FOXWORTH	
2	CATHY FREEMAN	
3	GEORGE ALVARADO	<i>GA</i>
4	BILL FAIRCLOTH	<i>B.F.</i>
5	MAX HILL	
6	DAVID MCALISTER	<i>D.M.</i>
7	GENE ROBINSON	<i>GR</i>
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	<i>C.D.</i>
11	LEONARD CONNER SR.	<i>L.C.</i>
12	<i>Margie Allen</i>	<i>MA</i>
13	<i>Benny Ellis</i>	<i>B.E.</i>
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 $\frac{2}{1}$   
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TYLER COUNTY NUTRITION CENTER:      DATE: 9-5-24  
ACTIVITY Pom 100's

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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TYLER COUNTY NUTRITION CENTER: DATE: 9-6-24  
ACTIVITY Donuts

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	B.F.
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(a)

TYLER COUNTY NUTRITION CENTER: DATE: 9-9-24  
ACTIVITY Donorcard

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	B.F.
5	MAX HILL	M.H.
6	DAVID MCALISTER	D.M.
7	GENE ROBINSON	
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	
11	LEONARD CONNER SR.	L.C.
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(7)

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY Donuts

DATE: 9-10-24

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	
6	DAVID MCALISTER	DM
7	GENE ROBINSON	
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(10)

TYLER COUNTY NUTRITION CENTER:

DATE: 9-11-24

ACTIVITY Domestic

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	B.F.
5	MAX HILL	M.H.
6	DAVID MCALISTER	D.M.
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(9)

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY Dominoes

DATE: 9-13-24

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	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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TYLER COUNTY NUTRITION CENTER:      DATE: 9-16-24  
ACTIVITY \_\_\_\_\_

	NAME	INITIAL
1	EVA FOXWORTH	
2	CATHY FREEMAN	
3	GEORGE ALVARADO	<i>GA</i>
4	BILL FAIRCLOTH	<i>B.F.</i>
5	MAX HILL	<i>M.H.</i>
6	DAVID MCALISTER	
7	GENE ROBINSON	<i>GR</i>
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	<i>CD</i>
11	LEONARD CONNER SR.	<i>L.C.</i>
12	<i>Shirley A.</i>	<i>SN</i>
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7

TYLER COUNTY NUTRITION CENTER: DATE: 9-17-24  
ACTIVITY

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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TYLER COUNTY NUTRITION CENTER:  
ACTIVITY \_\_\_\_\_

DATE: 9-18-24

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	D.M.
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
12	Becky Harmon	BH
13	James Harmon	J.H.
14		
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10

TYLER COUNTY NUTRITION CENTER: DATE: 9-19-24  
ACTIVITY \_\_\_\_\_

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	BF
5	MAX HILL	MH
6	DAVID McALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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9

TYLER COUNTY NUTRITION CENTER:      DATE: 9-20-24  
ACTIVITY \_\_\_\_\_

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	BF
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	LJ
9	KEN RAIMER	KR
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(17)

TYLER COUNTY NUTRITION CENTER:  
ACTIVITY \_\_\_\_\_

DATE: 9-23-24

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	B.F.
5	MAX HILL	MH
6	DAVID MCALISTER	D.M.
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD.
11	LEONARD CONNER SR.	LC
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9

TYLER COUNTY NUTRITION CENTER: DATE: 9-24-24  
ACTIVITY \_\_\_\_\_

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	Dm.
7	GENE ROBINSON	RR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(8)

TYLER COUNTY NUTRITION CENTER:

DATE:

9/25/24

ACTIVITY Dominoes

	NAME	INITIAL
1	EVA FOXWORTH	E F
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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TYLER COUNTY NUTRITION CENTER: 5

DATE: 9-26-24

ACTIVITY

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(8)

TYLER COUNTY NUTRITION CENTER:

DATE:

9-27-24

ACTIVITY Dominoes

	NAME	INITIAL
1	EVA FOXWORTH	E F
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	LC
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(2)

TYLER COUNTY NUTRITION CENTER:

DATE:

9-30-24

ACTIVITY

Dominoes

	NAME	INITIAL
1	EVA FOXWORTH	EF
2	CATHY FREEMAN	CF
3	GEORGE ALVARADO	GA
4	BILL FAIRCLOTH	
5	MAX HILL	MH
6	DAVID MCALISTER	DM
7	GENE ROBINSON	GR
8	LARRY AL JORDAN	
9	KEN RAIMER	
10	CHARLES DAVIS	CD
11	LEONARD CONNER SR.	
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(7)

TYLER COUNTY NUTRITION CENTER:

DATE:

9-12-24

SEITZ Food Bank

ACTIVITY

1	Catherine Deaver	14	27
2	Patricia Davis	15	28
3	HAROLD E. WILLIAMS	16	29
4	Susan Russell	17	30
5		18	31
6		19	32
7		20	33
8		21	34
9		22	35
10		23	36
11		24	37
12		25	38
13		26	34

Grains Food Group

1. Any food made from wheat, rice, oats, cornmeal, barley, or another cereal grain is in the Grains Group.

A. True

B. False

2. Folate (from foods such as spinach and black-eyed peas) and folic acid (from fortified foods such as enriched grains and from supplements) are especially important for which of the following groups?

A. Children under 2 years old

B. Athletes

C. Women of childbearing age

D. All of these

3. What is the most common food from the Grain Group eaten in the United States?

A. Tortillas

B. Bread

C. White rice

D. Popcorn

E. Pancakes

4. What is the best way to know that the bread you are buying is a whole-grain bread?

A. The bread tastes "grainy"

B. Bread is brown in color

C. The label says "100% wheat"

D. Another customer says so

E. Any ingredient that says "whole"

5. What food made from grains is pictured here?

A. Cornbread

B. Pita bread

C. Flour tortilla

D. English muffins

6. Refined grains are grains that have been milled, a process that removes the bran and germ. This is done to give grains a finer texture and improve their shelf life, but it also removes dietary fiber, iron, and many B vitamins. Which of these foods is a refined grain?

A. Oatmeal

B. Bulger (cracked wheat)

C. White rice

D. Popcorn

E. All of the above

7. The Grains Group could also be called the Carbohydrate Group because all foods that contain carbohydrates are in the Grains Group.



## Make Half Your Grains Whole Grains

Healthy eating is important at every age. Eat a variety of fruits, vegetables, grains, protein foods, and dairy or fortified soy alternatives. When deciding what grains to eat, choose options that are full of nutrients and limited in added sugars, saturated fat, and sodium. Start with these tips:

### Have whole grains at breakfast

Enjoy a whole-grain hot cereal. Oatmeal is a favorite but consider trying a grain that's new to you, like buckwheat or millet. You might find a new breakfast favorite.

### Enjoy a multigrain bowl

Create a one-dish meal by layering a mixture of grains like barley or wild rice with some colorful veggies and some low-fat cheese. Add your favorite protein and a dash of hot pepper sauce.

### Swap your sandwich bread

Look for sandwich-type breads made with whole grains. Pita, tortillas, naan, sliced breads, and rolls are all available as whole grains.

### Choose whole-grain takeout

Ask about whole-grain options when dining out or ordering take-out food. For example, make a switch to whole-wheat pasta or brown or wild rice.

### Experiment with a new grain

Cook a new grain like quinoa, amaranth, or millet. You can find cooking tips and recipes online. Grains are pretty versatile and also have lots of important nutrients.

### Switch up pizza night

Create individual, homemade pizzas on whole-wheat English muffins or tortillas. Or, make a traditional pizza using a premade whole-wheat flour. Don't forget the veggie toppings.



TYLER COUNTY NUTRITION CENTER:

ACTIVITY

9-19-94

DATE:

EAST TX Health Screening

1	Suzette Farrislett	14	Phil Hunt	27
2	Cheryl Sawyer	15	Bill Juchacz	28
3	Cathy Freeman	16	Brunton O'Robert	29
4	Candice Johnson	17	Pat & Deanne	30
5	George Alvarado	18	Carl Wayne Swinyard	31
6	Robert Sloan	19	John Potts	32
7	David McAlister	20	D. J. Potts	33
8	Judy Mott	21	Tommy Kennedy	34
9	HAROLD E Williams	22	Robert Perry	35
10	Barlene Perry	23		36
11	Carol Richards	24		37
12	Bill	25		38
13	Robert Moore	26		34

22

TYLER COUNTY NUTRITION CENTER: DATE: 9-13-24

ACTIVITY Weatherization JPS

1	Lola BARRETT	14	27
2	CAROL BARRETT	15	28
3	ENGEL DUCREST	16	29
4	[Signature]	17	30
5	[Signature]	18	31
6	Phil Wolff	19	32
7	Shirley Rebeck	20	33
8	Patricia S. Summey	21	34
9	Carol S. Summey	22	35
10	Barbara Hight	23	36
11	Mary Nell Roney	24	37
12		25	38
13		26	34

(11)



TYLER COUNTY NUTRITION CENTER:

DATE: 9-13-24

ACTIVITY Weatherization sign

1	Hilda Barton	14	27
2	Johnny Barton	15	28
3	Judith Evans	16	29
4	Abner Muehle	17	30
5	Arnie Bradlock	18	31
6	Judy Mott	19	32
7	Madeline Spratt	20	33
8	Lou Fell	21	34
9	Margie Kandle	22	35
10	Kenny Fuddell	23	36
11	Ricky Patrick	24	37
12	Burtis Carter	25	38
13		26	34

(19)



**Greater East Texas Community Action Program**

638A N. University Dr. #212, N A C O G D O C H E S , TX 75961  
PHONE: (936) 585-7224 FAX: (936) 462-9152 WWW.GET-CAP.ORG  
(800) 621-5746 WXPROGRAMINFO@GET-CAP.ORG

Call 936-585-7224 or go to [www.get-cap.org](http://www.get-cap.org)

**REQUIRED DOCUMENTATION FOR ALL HOUSEHOLD MEMBERS: NO EXCEPTIONS**

**Proof of Citizenship by one of the following items:**

- U.S. Passport:
- Certified Vital Record Birth Certificate or Certificate of Birth Abroad) FS-240, DS-1350, or FS-545)
- U.S. American Indian or Alaska Native Tribal Card with photo
- Certificate of U.S. Citizenship (N-550, N-561)
- Permanent Resident Card or Resident Alien Card(I-551)

\*\*\*\*\*

**PROOF OF IDENTIFICATION FOR 18 AND OLDER  
one of the following items:**

- Driver’s Licenses or a photo ID card.
- Government Employee ID
- U.S. Military or military dependent ID

**PROOF FOR 17 AND YOUNGER (2 ITEMS)**

1. Social Security Card
2. Student ID
3. School Records
4. Immunization Record

\*\*\*\*\*

Proof of **ALL** income earned/received in the last 30 days from the date the application is dated

**This Year’s** award letter for Social Security, SSI, VA, SSDI, RSDI, TANF, Utility Reimbursement  
**We cannot accept bank statements or W2 tax forms**

**Additional information** if receive: Proof of Food Stamps, Child Support, Earned Income Tax Credit

\*\*\*\*\*

The General Authorization for Release of Information must be completed by the **ACCOUNT HOLDER or AUTHORIZED USER** on the account.

If you do not have any of the items listed for proof of Citizenship or Identification, please contact GETCAP for other options.

**Application is not a guarantee of services, you must qualify for programs.**

Do not submit the application until you have all the information required and the application is filled out and signed completely.

\*\*\*\*\*

**WEATHERIZATION**

**Weatherization DOES NOT include windows, doors, flooring, roofing, wiring, or plumbing for most projects.**

- Assessments are scheduled by our staff by phone call or home visits. After 2 (two) attempts to reach out with no response, your application will be deferred.
- Any missed appointment for an assessment with no prior notice will cause your application to be deferred. You are allowed to reschedule 1 (one) time. Any Subsequent attempts to reschedule an assessment will cause the application to be deferred.
- Any home that is considered a health and safety risk to our staff or contractors will be subject to further review at GETCAP’s discretion.
- Landlord Permission Form-RENTERS ONLY (see our website or request a copy)

**You must include a map or brief description of your home on page 3 of your application**

**PLEASE INCLUDE PROPER POSTAGE - MAIL WITH INSUFFICIENT FUNDS WILL BE RETURNED**

# Greater East Texas Community Action Program

## Application for Services

ALL FIELDS MUST BE COMPLETE

2024

Date:  
Received  
by:

Name of Applicant or Head of Household		Last four digits of Social Security Number			
Address		City	County	Zip	
Mailing Address if Different			Primary Phone #	Secondary or Alternate Phone#	
Email Address			Referred By		
<p><i>Is anyone in the household an employee, board member, family, friend, or former staff member of Greater East Texas Community Action Program?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If Yes, please identify name and county</i> _____</p>					

Please check the program you are applying

- Energy Assistance  
  RISE (Case Management)  
  Weatherization  
  Head Start  
  Water Assistance  
  Other

**\*Please use this legend to complete Health Care, Work Status, Education, Race, & Ethnicity Questions Below\***

Health Insurance: (more than one may be chosen)

- A. Medicaid
- B. Medicare
- C. State Children's Health Insurance (CHIP)
- D. State Health Insurance for Adults
- E. Military Health Care
- F. Direct Purchased
- G. Employment Based
- H. None

Education:

- A. 0 – 8 Grade
- B. 9 – 12 Grade
- C. High School Graduate or GED
- D. Some College
- E. 2- or 4-year College Graduate
- F. Graduate of other Post-Secondary School

Work Status:

- A. Full Time
- B. Part Time
- C. Migrant, Seasonal or Farm Worker
- D. Unemployed (6 months or less)
- E. Unemployed (more than 6 months)
- F. Unemployed (not in Labor Force)
- G. Retired

Race:

- A. Black or African American
- B1. Hispanic
- B2. White
- C. American Indian or Alaskan Native
- D. Asian
- E. Multi-race (2 or more)
- F. Other

ALL FIELDS MUST BE COMPLETED FOR EACH HOUSEHOLD MEMBER

Yes or No

Use Legend above to complete this section

FIRST & LAST NAME	RELATIONSHIP TO YOU	Social Security #	Date of Birth	Sex Male Female	Yes or No			Use Legend above to complete this section					
					ACTIVE MILITARY	VETERAN	DISABLED	HEALTH INSURANCE	WORK STATUS (18 years or older)	EDUCATION	RACE	ETHNICITY Hispanic or Non-	
1	SELF												
2													
3													
4													
5													
6													
7													

List additional members on back or separate page

**Does your family receive any of the following benefits? (Check)**

Social Security Retirement <input type="checkbox"/>	SSI <input type="checkbox"/>	TANF <input type="checkbox"/>	VA-Services – Connected Disability Compensation <input type="checkbox"/>	Other: Please Explain
Child Support <input type="checkbox"/>	SSDI <input type="checkbox"/>	EITC <input type="checkbox"/>	Worker's Compensation <input type="checkbox"/>	Alimony or other Spousal Support <input type="checkbox"/>
Disability Pension <input type="checkbox"/>	SNAP <input type="checkbox"/>	Pension <input type="checkbox"/>	Unemployment Insurance <input type="checkbox"/>	Private Disability Insurance <input type="checkbox"/>
				VA Non-Service Connected <input type="checkbox"/>

**Does your family receive any of the following benefits? (Check)**

WIC   
 Childcare Voucher   
 Public Housing   
 HUD-VASH  
 Permanent Supportive Housing   
 Housing Choice Voucher   
 Affordable Care Act Subsidy

Has this residence ever received services from the Weatherization Program?  Yes  No    When? \_\_\_\_\_

What year was your home built? \_\_\_\_\_ Do you OWN or RENT your residence? \_\_\_\_\_

If **OWNED**, type of housing?  Private Home     Mobile Home (Single or Double Wide)    Monthly Mortgage: \$ \_\_\_\_\_

If **RENTED**, type of housing?  Private Home     Mobile Home (Single or Double Wide)     Apartment

Subsidized Housing     Are utilities included in rent?  Yes     No    Monthly Rent: \$ \_\_\_\_\_

Landlord Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Phone#: \_\_\_\_\_

Type of **Air Conditioner** Used:  Window Unit     Central Unit     Evaporative Cooler     None

Type of **Heater** Used:  Gas Space Heater ---- How many? \_\_\_\_\_  Central Unit    or    Wall Furnace   
 Electric Heater --- How many? \_\_\_\_\_  Stove --- Gas    or    Wood

Is your roof leaking?  Yes  No    If YES, how long has it been leaking? \_\_\_\_\_    In how many rooms is it leaking? \_\_\_\_\_

Are there holes in your floors?  Yes  No    Does your home have a good foundation?  Yes  No

**Please explain what has happened in the past 30 days that has caused you to seek our assistance and/or a reduction in income:**

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I authorize the Texas Department of Housing and Community Affairs and its contracted agency to solicit/verify information on my energy billing and consumption histories, both past and future, to the extent that the information is used only to determine program eligibility and to provide data.

\*\*\*\*\*

Warning Section 1001 of the U.S. Code makes it a criminal offense to make willful false statements of misrepresentation to any Department or Agency of the U.S. as to any within its jurisdiction.

\*\*\*\*\*

I understand that a photocopy of this release is a valid as the original

**PART EIGHT-CERTIFICATION/CERTIFICACION**

1. The information provided is true and correct to the best of my knowledge and belief.  
*La información proveída en esta forma es correcta según mi mayor entendimiento.*
2. My household income has been annualized, at the time of application, according to pre-establishing agency procedures.  
*Los ingresos de mi hogar sido calculados anualmente según los reglamentos preescritos por la agencia.*
3. I understand I may request a hearing to appeal a denial of eligibility, amount of assistance received, or a delay of service delivery.  
*Comprendo que puedo solicitar una audiencia para apelar decisiones que me afectan, tales como: la elegibilidad al programa, asistencia recibida o tardanza de asistencia.*
4. I authorize the Texas Department of Housing and Community Affairs and it's contracted agencies to solicit/verify information on my utility and/ or fuel bills, both past and future, to the extent the information is used only to provide data.  
*Autorizo al "Texas Department of Housing and Community Affairs" y sus agencias contratadas a solicitar y verificar información sobre mis cuentas pasadas y futuras para luz y gas cuando la información se usa para reporter data estadística.*
5. I AM AWARE THAT I AM SUBJECT TO PROSECUTION FOR PROVIDING FALSE OR FRAUDULENT INFORMATION.  
*COMPRENDO QUE ESTOY SUJETO A SER PROCESADO SI LA INFORMACION ES FALSA O INCORRECTEA.*

**PART NINE-ELIGIBILITY DETERMINATION (OFFICE USE ONLY) \*\*DO NOT WRITE BELOW THIS LINE\*\***

Does the household meet the income requirements?  Yes  No

If not, has the applicant requested a hearing/appeal?  Yes  No

Does any member of the household fit into the following priority groups:

Elderly       Disabled       Elderly Disabled       Children 5 or under

Recommended Component:

Utility 6       Vulnerable       Crisis       Weatherization

Signature of Authorized Agency Staff \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*CASE MANAGEMENT WILL DETERMINE (ON A SEPARATE AGENCY DEVELOPED FORM):**

- Appropriate CEAP Component (Utility 6, Vulnerable, Crisis)
- Benefit Level Determination/Calculations
- Crisis Description/Resolution
- Vendors Paid and Amounts

Referrals/Coordination of Services

I acknowledge I have received Energy Saving Tips	Y	N
Do you have small children who are not in school? If so, would you like information about our Head Start Program? (Locations: Nacogdoches, San Jacinto, Smith, Houston and Walker County)	Y	N
Do you have specific goals that you would like to achieve in employment or education?	Y	N
Do you need assistance locating your local child support office?	Y	N
Would you like for a representative to contact you about RISE (Reaching Independence through Supportive Elevation)	Y	N
Would you like a representative to contact you about Weatherization?	Y	N

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Customer Service Rep: \_\_\_\_\_ Date: \_\_\_\_\_

**TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS**  
Household Status Verification Form



**Systematic Alien Verification for Entitlements (SAVE) System and US Citizenship/US National**  
Applicant Certification Form for CEAP, DOE-WAP, LIHEAP-WAP Subrecipients, and SHTF, ESG, HHSP, EH (political subdivision only)

The program for which you are applying requires verification that you are a U.S. citizen, a non-citizen national, or a legal resident of the United States. Documentation of your status is required. This agency uses the Systematic Alien Verification for Entitlements (SAVE) System to verify the status of non-citizens.

Household Member Name	U.S. Citizen (Born or Naturalized) or U.S. National (Yes/No)	Qualified Alien (Yes/No)	Documentation Provided for:	
			Citizenship/Qualified Alien	Identification

To add additional household members, use another copy of this form.

**I AM AWARE THAT I AM SUBJECT TO PROSECUTION FOR PROVIDING FALSE OR FRAUDULANT INFORMATION.**

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Applicant's Signature

Date

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Signature of agency staff certifying they verified the above documents

Print Staff Name

Date

**\*DECLARATION OF INCOME STATEMENT  
(DECLARACION DE INGRESOS)**

Applicant Name (Nombre del Solicitante)	Applicant Last Name (Apellido)	Suffix (Sufijo)
Address (Dirección)	City (Ciudad)	Zip Code (Código Postal)

State the gross income for household members, 18 years and older, who have no documentation of the income received in the **30 day period** prior to the date of application for assistance: *(Declarar el ingreso recibido por los miembros de su hogar, que tienen 18 años de edad ó mas, y que no tienen documentación de ingresos por los 30 días antes del aplicar para asistencia)*

Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:

My household has no documented proof of income due to the following situation:  
*(Mi hogar no tiene prueba para documentar los ingresos por medio de tal razones):*

I certify that the above information is true and correct to the best of my knowledge and belief. *(Yo certifico que la información proveída de los ingresos es verdadera y correcta según mi saber y creencia.)*

I understand that the information will be verified to the extent possible; and that I may be subject to prosecution for providing false or fraudulent information. *(Comprendo que la información será verificada hasta donde sea posible y que puedo ser enjuiciado por haber proveído información falsa ó fraudulenta.)*

\_\_\_\_\_  
*(Applicant Signature/Firma del Solicitante)*

\_\_\_\_\_  
*(Date/Fecha)*

## Energy Saving Tips

You can do something to keep your summer electric bills at their lowest by following these simple steps.

1. **Thermostat setting:** You can reduce your air-conditioning cooling cost by as much as 14% simply by increasing the thermostat setting 1 degree. For energy conservation, we recommend a 78-degree setting.
2. **Insulation:** Insulation is designed to keep heat out during the summer and to keep heat in during the winter. Adequate insulation can more than pay for itself in just a few years, in money saved on air-conditioning and heating operation.
3. **Let it breathe:** Dirty filters cause unnecessary strain and can lead to equipment breakdowns. Air-conditioning servicemen say about half of their trouble calls are traced to dirty filters. We suggest changing or cleaning your filters at least once a month, preferably every two weeks for the best results.
4. **Maintenance:** Have your unit checked and cleaned each year to insure maximum efficiency and long life. Have the coils checked and cleaned to see if dirty and check the refrigerant for charge and belts for wear and adjustments.
5. **Efficiency:** If your unit is 10 years old or older a new, properly sized, high efficiency system should be installed.
6. **Don't forget your ducts:** You can save 5% or more on your air-conditioning costs by having your duct system checked for air leaks and for adequate insulation.
7. **Attic ventilation:** Attic temperatures sometimes rise to 140 degrees during the summer months. Good attic ventilation will lower the temperature and reduce cooling requirements inside the home.
8. **Air leaks:** You can save up to 10% on air-conditioning costs with a well-sealed house. Seal leaks around doors, windows, outlets, switch plates, and plumbing outlets. Weather stripping will make your home more comfortable too.
9. **In the shade:** If your house has a lot of windows, particularly on the east and west sides, you save money by shading the glass with awnings, solar screens, or shutters. Trees and shrubs that shade your home also help to reduce the air-conditioning workload. Venetian blinds or drapes are helpful as well.
10. **Turn it on:** By using kitchen and bathroom exhaust fans to remove excess heat and moisture, you can save each month on your overall cooling bill.
11. **Lower is better:** You can save money on your water heating bill by setting the temperature control at a moderate 140 degrees, or as low as needed, and still have plenty of hot water.
12. **Up the chimney:** If you close your fireplace damper during the summer and winter, (when not in use), you save on both your cooling and heating bills. Installation of a glass fireplace screen will also help prevent air from going up the chimney.

**Attention: This is your copy, keep for your records.**