



Community Health Centers of Benton and Linn Counties is able to help our patients offset the cost of health services due to grant support from the government. As a result we are required to gather income and housing information for each of our patients. We realize this is very personal information and we will continue to protect your confidentiality with this information as well as with your personal health information.

### Employment Information

Have you or anyone else in your household worked in any of the following industries during the last two years? Please check all that apply:

- Orchards
- Packing house (fruits, vegetables, gift boxes)
- Reforestation / tree planting
- Vineyards
- Crops / harvesting (fruit, vegetables, flowers, trees, mushrooms, etc.)

If you checked any of the above boxes, did your work ever require your family to move?

Yes  No

Have you been a member of the armed forces?  Yes  No

Employer(s) *optional*: \_\_\_\_\_

### Income Information

How many members are there in your family? \_\_\_\_\_

What is your annual household income (this includes spouse/partner)? \_\_\_\_\_

### Housing Information

Are you and your family members living in someone else's household?  Yes  No

In the past 24 months, have you and your family been forced to move into a temporary situation because of housing costs?  Yes  No

In the past 24 months, have you or someone in your household lived in one of the following:

shelter  transitional housing  camp or street

Name _____
Client # _____ DOB _____

