## Mediation & Custody Evaluation Services (MCES) Center Street Center | Tracy E. Hill, Ph.D. & Associates LLC

## BENEFIT FEE APPLICATION

To apply for a reduced (benefit LLC) fee for your family, complete the form below, sign your name and return it to the address listed below with your application fee of \$35. Call MCES (484.896.9161) if you need help.

## PART I. LIST ALL HOUSEHOLD MEMBERS & GROSS WEEKLY INCOME

	Employment \$	Welfare, Child Support, Alimony	Pension, Retirement, SS, SSI, VA \$	Other Income \$	Receive: HAP, SNAP, CHIP, TANF, Food Stamps, WIC, F/R Lunch (please specify)
Example, Sue S	\$200/wk	n/a	n/a	\$50/wk	SNAP
Other Income (ex: unemploy	ment compensation	n, side gig,	please speci	fy:	
your child is receiving F/R L	unch at school, ple	ase specify	the name/lo	cation of s	chool(s):
filling out this application does nompleted. You must include all instructions include yourself and all chilmonth), enter the weekly amount bee.	ndividuals living in y dren living with you	your househ (full or part	old, related or -time). If your	not who she income var	are income and expenses. Yeries (i.e. seasonal or month to
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OFFICE USE: Fee Paid: □

Eligible:  $Y \square N \square$