## I AM ASSISTANCE REQUEST REQUEST FOR DISASTER RELIEF

		DATE:	
MEMBER NAME:	DL/LL:	CARD#:	
ADDRESS:	- 1 1		
CITY:	STATE: Z	IP CODE:	
EMPLOYER:		SHIFT:	
ADDRESS:		0.	
EMAIL:	D	OAMAGE DATE:	
ARE YOU LIVING IN YOUR HOM	E? (IF NOT, W	HERE ARE YOU STAYING?)	
PHONE NUMBER WHERE YOU CA	AN BE REACHED:	Z	
DESC	RIPTION OF LOSS OR DA	AMAGED	
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		/ / / / /	
RETURN FORM TO DIRECTOR C. UPPER MARLBORO, MD 20772-26		JR., 9000 MACHINISTS PLACE,	
Request submitted by I AM ASSISTA	ANCE assigned representati	ve:	
NAME:(PRINT NAME)	TITLE:	PHONE:	
(PRINT NAME)	7 1 1 1		
SIGNATURE:	<b>D</b> A	ATE:	
ANA AGGIGINANCE DEDDEGENITA		A CE MALVE DEOLIECE/C) FOR	
I AM ASSISTANCE REPRESENTA' ASSISTANCE THROUGH YOUR G			
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USE THIS DRAWING IF CAMERA PHOTOS ARE NOT AVAILABLE OR THE PICTURES CANNOT BE SEE WELL.

PLEASE SKETCH THE DAMAGE TO THE HOUSE, SHOWING WATER LINES AND EXPLAIN THE DAMAGE ON THE ABOVE DRAWING.

REMARKS:	

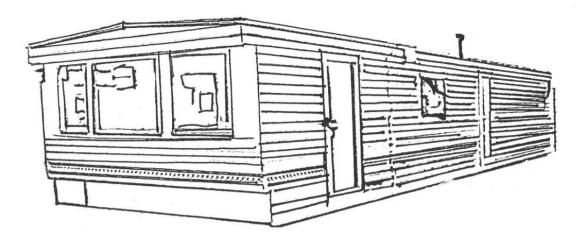
**EXAMPLE 1** 



USE THIS DRAWING IF CAMERA PHOTOS ARE NOT AVAILABLE OR THE PICTURES CANNOT BE SEE WELL.

PLEASE SKETCH THE DAMAGE TO THE HOUSE, SHOWING WATER LINES AND EXPLAIN THE DAMAGE ON THE ABOVE DRAWING.

REMARKS:



USE THIS DRAWING IF CAMERA PHOTOS ARE NOT AVAILABLE OR THE PICTURES CANNOT BE SEE WELL.

PLEASE SKETCH THE DAMAGE TO THE TRAILER, SHOWING WATER LINES AND EXPLAIN THE DAMAGE ON THE ABOVE DRAWING.

REMARKS:	
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	EXAMPLE 3