

Hamtramck GOODFELLOWS

3401 Evaline
Hamtramck, MI 48212

Old Newsboys

REQUEST FORM

Name: _____

Address: _____

**Number of
Children:** _____

Number of Adults: _____

**Total Annual \$
Household Income:** _____

Please note: The Hamtramck Goodfellows program will try to fill all requests for assistance. However, our program is donation based and there is no guarantee that all requests can be filled. Your request may not be filled.

This form *MUST* be returned no later than 3:00 pm Friday December 13, 2019.

Forms may be returned to Hamtramck City Hall, Hamtramck Housing Offices or the Hamtramck Fire Department.

Additional information: _____

Received by: _____ **Type of I.D.:** _____