

**APPENDIX D**  
**PUBLIC FORMS**

<b>FORM NUMBER</b>	<b>FORM TITLE</b>
<b>DFA-67-A</b>	<b>Burial Billing Form</b>
<b>DFA-BU-1</b>	<b>Application for Burial Benefits</b>
<b>DFA-BU-2</b>	<b>Affidavit of Responsible Relative</b>
<b>OFA-NEMT-1</b>	<b>NEMT Application</b>
<b>OFA-NEMT-1A</b>	<b>Supplement to NEMT Application</b>