

CHECK BOX	CATEGORY OF ELIGIBILITY	REQUIRED DOCUMENTATION
<b>2. SURVIVORS OF PERSONS WITH HIV</b>		
<input type="checkbox"/>	<b>Surviving spouse of a person with HIV.</b>	<p><b>All medical and legal documentation</b> required for the person with HIV (<i>i.e.</i>, the individual with a blood-clotting disorder and HIV, the lawful spouse with HIV, the former lawful spouse with HIV, or the child with HIV), as described in Section 1 above.</p> <p><b>Legal documentation:</b></p> <ol style="list-style-type: none"> <li>(1) a death certificate for the person with HIV, or other evidence of that person's death; and</li> <li>(2) a marriage certificate or other proof of lawful marriage, which shows that you were the spouse of the person with HIV.</li> </ol>
<input type="checkbox"/>	<b>Surviving child or children of a person with HIV.</b>	<p><b>All medical and legal documentation</b> required for the person with HIV (<i>i.e.</i>, the individual with a blood-clotting disorder and HIV, the lawful spouse with HIV, the former lawful spouse with HIV, or the child with HIV), as described in Section 1 above.</p> <p><b>Legal documentation:</b></p> <ol style="list-style-type: none"> <li>(1) a death certificate for the person with HIV, or other evidence of that person's death; and</li> <li>(2) a birth certificate, adoption certificate, documentation showing that you are the stepchild of the person with HIV (<i>i.e.</i>, a certificate of marriage between your parent and the person with HIV), or other documentation showing that you are the child of the person with HIV.</li> </ol>
<input type="checkbox"/>	<b>Surviving parent or parents of a person with HIV.</b>	<p><b>All medical and legal documentation</b> required for the person with HIV (<i>i.e.</i>, the individual with a blood-clotting disorder and HIV, the lawful spouse with HIV, the former lawful spouse with HIV, or the child with HIV), as described in Section 1 above.</p> <p><b>Legal documentation:</b></p> <ol style="list-style-type: none"> <li>(1) a death certificate for the person with HIV, or other evidence of that person's death; and</li> <li>(2) for each surviving parent, a birth certificate, adoption certificate, or other documentation which shows that you are the parent of the person with HIV.</li> </ol>

If you have any questions, go to the Ricky Ray web-site, [www.hrsa.gov/bhpr/rickyray](http://www.hrsa.gov/bhpr/rickyray), or call the toll-free number, 1-888-496-0338.