



California LifeLine Household Worksheet

555-555-5555
JOHN SAMPLE

Step 5

California LifeLine is a government program that provides discounted phone service to qualified households. Only ONE discount per household is allowed. Households cannot get the discount from multiple phone companies. A HOUSEHOLD includes adults and children who are living together at the same address as one economic unit. An economic unit consists of all adults contributing to and sharing in the household's income and expenses.

An adult is any person 18 years of age or older, or an emancipated minor (a person under age 18 who is legally considered to be an adult). Household expenses include: food, health care expenses (such as medical bills), cost of renting or paying a mortgage on your place of residence (a house or apartment, for example), and utilities (including water, heat and electricity). Income includes, but is not limited to: wages, salaries, interest, dividends, alimony and child support, grants, gifts, allowances, stipends, lottery winnings, inheritances, worker's compensation, unemployment and public assistance benefits, social security payments, pensions, rental income, income from self-employment, and cash payments from other sources, and all employment-related non-cash income.

Spouses and domestic partners are considered to be part of the same household. Children under the age of 18 living with their parents or guardians are considered to be part of the same household as their parents or guardians. If an adult has no income, or minimal income, and lives with someone who provides financial support to that adult, both people are considered part of the same household.

You have been asked to complete this Worksheet because someone else currently receives a discount at your service address. This other person may or may not be a part of your household. Answer the questions below to determine whether there is more than one household residing at your address.

1. Does your spouse or domestic partner (that is, someone you are married to or in a relationship with) already receive discounted phone service? (select no if you do not have a spouse or partner) Yes No

- If you selected **YES**, you may not sign up for California LifeLine because someone in your household already receives the discount. Only ONE discount is allowed per household.
- If you selected **NO**, please answer question #2.

2. Other than a spouse or partner, do other adults (people over the age of 18 or emancipated minors) live with you at your address?

- A. Yes No A parent
- B. Yes No An adult son or daughter
- C. Yes No Another adult relative (such as a sibling, aunt, cousin, grandparent, grandchild, etc.)
- D. Yes No An adult roommate
- E. Yes No Other _____

- If you selected **NO** for each statement above, you do not need to answer the remaining questions. Please initial line **G**, below, and sign and date the worksheet.
- If you selected **YES** to any part of question #2, please answer question #3.

3. Do you share living expenses (bills, food, etc.) and share income (either your income, the other person's income or both incomes together) with at least one of the adults listed above in question #2? Yes No

- If you selected **NO**, then your address includes more than one household. Please initial lines **F** and **G** below, and sign and date the worksheet.
- If you selected **YES**, then your address includes only one household. You may not sign up for California LifeLine because someone in your household already receives the discount.

CERTIFICATION

Please initial the certifications below and sign and date this worksheet.
Submit this worksheet along with your California LifeLine form and copies of your proof of eligibility.

Initial Here

F. I certify that there are multiple households at my service address.

G. I understand that violation of the one-per-household requirement is against the Federal Communication Commission's rules and may result in me losing my California LifeLine discounts, and potentially, prosecution by the United States government.

X Applicant's Signature (REQUIRED)

Today's Date: / /

Fill in this bubble if signed by a Legal Guardian or a person with Power of Attorney.

Month

Day

Year



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