

## TELEPHONE ASSISTANCE PROGRAMS AVAILABLE TO LOW-INCOME HOUSEHOLDS

Qwest® recognizes how important telephone service is to connect people with family, friends, businesses and emergency services. That's why we offer two federal telephone assistance programs — Lifeline and Link-Up — to low-income families that qualify.

**LIFELINE** provides eligible customers with a monthly credit to help offset the cost of their home telephone line. (Telephone service must be billed to the individual applying for assistance.)

**LINK-UP** provides eligible customers with a one-time credit equal to 50% of the installation charges for a home telephone line. Customers who qualify for Lifeline assistance automatically receive the Link-Up credit if their application for telephone assistance is received within 60 days of their home phone installation date and if they have not previously received a Link-Up credit at the same address.

### WHO IS ELIGIBLE?

Customers are automatically eligible for these telephone assistance programs if they already participate in one of the following low-income programs:

- Medicaid
- Food Stamps
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance
- Low-Income Home Energy Assistance
- Temporary Assistance to Needy Families program (TANF)
- National School Lunch Program (NSL)

Customers may also be eligible for telephone assistance if their household income is at or below 135% of the Federal Poverty Guidelines (see enclosed application form for details).

more...

**1 800-244-1111** for customer assistance  
**qwest.com**



**HOW TO APPLY**

If you meet one of the eligibility requirements above, please complete and sign the enclosed Telephone Assistance Application form and mail it to the address which appears on the back of the form.

Customers applying for Lifeline based on their family size and income level must also send in a copy of one of the following:

- Last year's Federal or State Income Tax Return
- Current Income Statement or Paycheck Stubs for three consecutive months
- Social Security Statement of Benefits
- Veteran's Administration Statement of Benefits
- Retirement or Pension Statement of Benefits
- Unemployment or Worker's Compensation Statement of Benefits
- Letter of Participation in Federal or BIA General Assistance
- Divorce Decree
- Child Support Documentation

**If you have additional questions about Lifeline or Link-Up, please call Qwest at 1 800-244-1111.**

## APPLICATION FOR TELEPHONE ASSISTANCE

**HOW TO APPLY:** First, complete EITHER section A or section B. Then complete the rest of the form on the back of this sheet, sign it where indicated and mail to the address shown. **If you have any questions or need help with this form, please call 1 800-244-1111**

**1. FILL OUT EITHER SECTION A -OR- SECTION B:**

**SECTION A**  
 I CURRENTLY PARTICIPATE IN THE FOLLOWING PROGRAM(S):  
 (Check all that apply)

- Medicaid  
 (e.g. Title XIX/Medical, State Supplemental Assistance)
- Food Stamps
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance
- Low-Income Home Energy Assistance
- Temporary Assistance to Needy Families program (TANF)
- National School Lunch program (NSL)

**SECTION B**  
 IF YOU DO NOT PARTICIPATE IN ONE OF THE PROGRAMS LISTED IN SECTION A, you may qualify for telephone assistance based on the size and income level of your household. (Household refers to the number of people who occupy your housing unit as their place of residence.) **Please check the box below which applies to your household and make sure to enclose copies of the supporting documentation requested on the previous sheet under "How to Apply":**

Check One Box	Number of people in your household:	Household income at or below:
<input type="checkbox"/>	1	\$ 13,230
<input type="checkbox"/>	2	\$ 17,820
<input type="checkbox"/>	3	\$ 22,410
<input type="checkbox"/>	4	\$ 27,000
<input type="checkbox"/>	5	\$ 31,590
<input type="checkbox"/>	6	\$ 36,180
<input type="checkbox"/>	7	\$ 40,770
<input type="checkbox"/>	8	\$ 45,360
<input type="checkbox"/>	Other:	*\$

\*For each additional person, add \$4,590

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**2. COMPLETE YOUR INFORMATION (PLEASE PRINT):**

Name \_\_\_\_\_  
(First) (Middle) (Last)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone Number with area code  
( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**IMPORTANT:** the name of the person who is applying for Telephone Assistance must appear on the telephone account for this number.

Telephone Number where you can be reached or receive messages  
( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**3. VERIFY YOUR ELIGIBILITY AND SIGN THIS FORM:**

I agree to notify Qwest when I no longer participate in any of the above qualifying public assistance programs or when there has been a change in the size or income level of my household.

**I certify under penalty of perjury the above information is true.** I have read the information on this application and understand I must meet the qualifications listed on the front of this form to receive Telephone Assistance (Lifeline and/or Link-Up) on my primary residential line.

Signature \_\_\_\_\_ Social Security Number \_\_\_\_\_ Date \_\_\_\_\_

**4. MAIL THIS FORM AND ANY SUPPORTING DOCUMENTATION TO:**

Qwest Telephone Assistance  
P.O. Box 2738  
Omaha, NE 68103-2738