

TELEPHONE ASSISTANCE PROGRAMS AVAILABLE AT QWEST FOR MINNESOTA CUSTOMERS

In order to make telephone service more affordable for low-income households, Qwest supports the federal government's Lifeline and the Link-Up telephone assistance programs.

WHAT DO THESE PROGRAMS PROVIDE?

- **LIFELINE** provides eligible customers with a **monthly credit** of \$9.29 to help offset the cost of their home telephone line. In order to receive this credit, the telephone service must be billed to the individual applying for telephone assistance.
- **LINK-UP** provides eligible customers with a **one-time credit** of \$9.18 to help offset the installation charge associated with their home telephone line. Customers who qualify for Lifeline assistance will also be given the Link-Up credit, if their application for telephone assistance is received within 60 days following the installation of their phone service and if they have not previously received a Link-Up credit at this address.

WHO IS ELIGIBLE FOR TELEPHONE ASSISTANCE?

Customers qualify for telephone assistance when they participate in one of the following low-income programs:

- Medicaid/Medical Assistance
- Food Support/Food Stamps
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance or Section 8
- Low-Income Home Energy Assistance Program (LIHEAP)
- National School Lunch Program's Free Lunch Program
- Temporary Assistance to Needy Families Program (TANF) – (Minnesota Family Investment Program or MFIP)

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

HOW DO I APPLY?

If you meet one of the eligibility requirements above, please complete and sign the attached Telephone Assistance Application form and mail it to:

Qwest, PO Box 2738, Omaha, NE 68103-2738.

Customers applying for Lifeline based on the size and income level of their household must provide 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

FOR MORE INFORMATION

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

TELEPHONE ASSISTANCE APPLICATION FOR MINNESOTA

(Please Print)

Name _____
(First) (Middle) (Last)

Address _____
(Street) (City) (State) (Zip)

Home Telephone Number: _____
(The name of the person applying for Telephone Assistance must appear on the telephone account.)

Telephone Number where you can be reached or receive messages: (_____) _____ - _____
area code & 7-digit number

1. I currently participate in the following program(s): **Check all that apply**

- _____ Medicaid/Medical Assistance
_____ Food Support/Food Stamps
_____ Supplemental Security Income (SSI)
_____ Federal Public Housing Assistance or Section 8
_____ Low-Income Home Energy Assistance Program (LIHEAP)
_____ National School Lunch Program's Free Lunch Program
_____ Temporary Assistance to Needy Families Program (TANF) – (Minnesota Family Investment Program or MFIP)

2. IF YOU DO NOT PARTICIPATE IN ONE OF THE PROGRAMS LISTED ABOVE, 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
attach the supporting documentation described on the previous page:

Please Check Box	Size of Household Unit:	Household Income at or Below:	Please Check Box	Size of Household Unit:	Household Income at or Below:
<input type="checkbox"/>	1	\$12,920	<input type="checkbox"/>	6	\$34,925
<input type="checkbox"/>	2	\$17,321	<input type="checkbox"/>	7	\$39,326
<input type="checkbox"/>	3	\$21,722	<input type="checkbox"/>	8	\$43,727
<input type="checkbox"/>	4	\$26,123	<input type="checkbox"/>	No: _____	*\$ _____
<input type="checkbox"/>	5	\$30,524	*For each additional person, add \$4,401		

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 above qualifications to receive Telephone Assistance (Lifeline and/or Link-Up) on my primary residential line.

Your Signature Social Security Number _____ Date _____

Mail completed form and supporting documentation to:

Qwest
PO Box 2738
Omaha, NE 68103-2738