



NU-Telecom
The Best Solutions for Video, Internet & Telecommunications

2009 Estimated Income Requirements for a Household at or below 135% of the Federal Poverty Guidelines

Persons in Family or Household	48 Contiguous States and D.C.
1	\$14,621
2	\$19,670
3	\$24,719
4	\$29,768
5	\$34,817
For each additional person, add	\$5,049

I agree to notify the telephone company when I no longer participate in any of the above qualifying programs. I certify under penalty of perjury the above information is true. I have read the information on this application and understand that participation in one of the above programs to receive telephone service discounts on my primary residential line.

I am an "Authorized Representative" for this applicant and am submitting this form on behalf of the customer. I am willing to assist the applicant in seeking telephone service discounts.

Print "Authorized Representative" name: _____ Big Phone number: _____ Date: _____

Complete Application and call along with proof of eligibility to NU-Telecom, Inc.

NU-Telecom 37 W. Minnesota St. Paul, MN 55102 Tel: 651.288.5577 Fax: 651.288.5577 www.nu-telecom.com	NU-Telecom 37 W. Minnesota St. Paul, MN 55102 Tel: 651.288.5577 Fax: 651.288.5577 www.nu-telecom.com
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Minnesota Telephone Service Discount Application

(Please Print)

Name: (Please Print) Last _____ First _____ Middle _____

Address: Street _____ City _____ State: MN Zip _____

Tel. # if you have service (MUST be in your name)
(____) - _____
Area Code & Phone number

Tel. # where you can be reached:
(____) - _____
Area Code & Phone number

Note: Proof of eligibility must be included with this application.

Name of Local Telephone Co _____ No. of people living in your household _____

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

- Medicaid/Medical Assistance
- Fed. Public Housing Assistance (Section 8)
- Supplemental Security Income (SSI)
- National School Free Lunch Program
- Food Support (food stamps)
- Minnesota Family Investment Program (MFIP)
- Low-Income Home Energy Assistance Prog (LIHEAP)

2. I live on a reservation and participate in the following program(s): Check all that apply

- Tribally administered Temp. Assistance for Needy Families
- Head Start (for those meeting income qualifying standard)
- Bureau of Indian Affairs Gen. Assistance
- Tribal Nat'l. School Free lunch Program

3. I do not participate in any programs listed in #1 or #2 and my income is at or below 135% of Federal Poverty Guideline. Please attach one of the documents below.

- Last year's State, Federal or Tribal Tax Return
- 3 consecutive months of most recent paycheck stub
- Veterans Administration Benefits Statement
- Unemployment/Workmen's Compensation Statement
- Child Support Document
- Current annual income statement from employer
- Social Security Benefits Statement
- Retirement/Pension Benefit Statement
- Divorce Decree
- Other

I agree to notify the telephone company when I no longer participate in any of the above qualifying programs. I certify under penalty of perjury the above information is true. I have read the information on this application and understand I must participate in one of the above programs to receive telephone service discounts on my primary residential line.

Applicant Signature _____ Social Security Number _____ Date _____

I am an "Authorized Representative" for this applicant and am submitting this form on behalf of this customer. I am willing to assist this applicant in seeking telephone service discounts.

Print "Authorized Representative" name _____ Day Phone Number _____ Date _____

Complete Application and mail along with proof of eligibility to NU-Telecom Inc.