EF-267-H-A-R01-0611-13000674-1 BOE-267-H-A (P1) REV. 01 (06-11)

ELDERLY OR HANDICAPPED FAMILIES FAMILY HOUSEHOLD INCOME REPORTING WORKSHEET



Robert Menvielle Imperial County Assessor

940 W. Main Street Suite 115 El Centro, CA 92243 Main Office: (442) 265-1300 Website: assessor.imperialcounty.org

Section 214(f) of the Revenue and Taxation Code provides that property owned by nonprofit organizations providing housing for low- and moderate-

Promptly complete, sign and return this statement to the manager of the organization that provides the housing so the organization will have ti to complete the form that must be filed with the Assessor.		
ADDRESS OR UNIT NUMBER (NO P. O. BOX NUMBERS)		
NAME(S) OF OCCUPANTS	NUMBER OF PERSONS IN FAMILY HOUSEHOLD	INCOME LIMIT
	1	\$48,650
	2	\$55,600
	3	\$62,550
	4	\$69,500
	5	\$75,050
	6	\$80,600
	7	\$86,200
	8	\$91,750
more than one person is residing in a unit, do you consider yourselves a far NO, report on line 1 below the number of persons in your family. Each non-influence of persons in family household: I certify (or declare) under penalty of perjury under the laws of the State or year did not exceed \$ (Enter the amount of the income in	family member must complete a separate family member must complete a separate family member and family household incomplete family household incomplete.	come for the prior calend

NOTE TO MANAGER: RETAIN THIS FORM FOR YOUR RECORDS

