EF-267-H-A-R01-0611-54000223-1 BOE-267-H-A (P1) REV. 01 (06-11)

ELDERLY OR HANDICAPPED FAMILIES FAMILY HOUSEHOLD INCOME REPORTING WORKSHEET



Tara K. Freitas County Assessor/Clerk-Recorder

221 S. Mooney Blvd., Room 102-E Visalia, CA 93291-4593 Ph: (559) 636-5100 Fax: (559) 737-4468

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NAME(S) OF OCCUPANTS			
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NAME(S) OF OCCUPANTS			
NAME(S) OF OCCUPANTS	NUMBER OF PERSONS IN FAMILY HOUSEHOLD	INCOME LIMIT	
	1	\$70,400	
	2	\$80,450	
	3	\$90,500	
	4	\$100,550	
	5	\$108,600	
	6	\$116,650	
	7	\$124,700	
	8	\$132,750	
NO, report on line 1 below the number of persons in your family. Each non-family Number of persons in family household: I certify (or declare) under penalty of perjury under the laws of the State of Cali year did not exceed \$ (Enter the amount of the income limit states)	y member must complete a separate if ornia that the family household inc	come for the prior cale	

NOTE TO MANAGER: RETAIN THIS FORM FOR YOUR RECORDS