



AT&T Wisconsin Lifeline

Lifeline makes phone service even more affordable.

Lifeline offered by AT&T Wisconsin is for customers who want the lowest monthly rate while still being allowed to have additional services and features. In addition, if you qualify for Lifeline and also live on a federally recognized Tribal Lands and you may receive even deeper discounts.

Eligibility. To qualify for Lifeline, a household must participate in one of the following:

- Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps)
- Low-income Heat & Energy Assistance (LIHEAP)
- Medical Assistance (including BadgerCare, Senior Care, Family Care, and Medical Assistance Purchase Plan)
- Child Care
- Supplemental Security Income (SSI)
- Homestead Act
- Wisconsin Works

Tribal Lands Lifeline If you live on a tribal land/reservation (as defined in Title 25—Code of Federal Regulation, Section 20.1, paragraph V), you may qualify for Lifeline if you participate in one of the above programs or one of the following:

- BIA General Assistance
- Tribally Administered Temporary Assistance for Needy Families (TANF)
- Head Start (must meet income-qualifying standard)
- National School Free Lunch Program

Benefits

- 100% Discount on line connection
- Monthly discount on basic service of over \$ 8.00
- Waiver of deposit for local service**
- Optional toll restriction at no charge**
- Optional blocking of 900/976 numbers
- Additional lines allowed*
- Optional services available (e.g., Caller ID, Call Waiting, etc.)
- Optional blocking of pay-per-use (e.g., 3-Way Calling, etc.)

* Lifeline plan benefits are only applicable on one phone line at the customer's principal place of residence.

** Deposit waived on new local service only. If customer has outstanding toll debt, toll restriction required.

Terms and conditions are subject to change without notice. Some service restrictions may apply.

Call 1-800-440-9853 for more information.

Call 1-800-972-9002 for TTY Service.

Es importante que usted entienda esta información. Si usted no lee el idioma inglés, por favor llame al 1-800-910-1030 para hablar directamente con un representante bilingüe, o pida información a una de las organizaciones mencionada en este folleto.

AT&T Wisconsin Lifeline Application

This signed authorization is required by the Wisconsin Department of Health and Social Services to release information to AT&T Wisconsin concerning Supplemental Security Income (SSI) or Medical Assistance (MA) eligibility. It is also required to verify eligibility for those who are not a part of the Department of Health and Social Services database. This authorization is only for the purpose of verifying your participation in these programs and will not be used for any other purpose.

1. PLEASE READ CAREFULLY AND FILL OUT COMPLETELY

Name of Applicant _____

(last) (first) (middle initial)

My home telephone number is:

(include area code)

(____) _____ - _____

Home Address _____

(number) (street) (apartment #, if any)

My daytime telephone number is:

(include area code)

(____) _____ - _____

(city or town)

(state)

(zip code)

2. WHAT YOU NEED TO QUALIFY

Please provide your Social Security Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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I participate in one of the following programs and authorize AT&T Wisconsin to verify this (please check box):

- Supplemental Nutrition Assistance Program (SNAP)
- Wisconsin Works
- Supplemental Security Income (SSI)
- Childcare

- Medical Assistance (Title 19 including BadgerCare, Senior Care, Family Care, and Medical Assistance Purchase Plan)
- Low-Income Home Energy Assistance Program (LIHEAP)

Note about the Homestead Credit: if you do not receive benefits from any of the above programs but receive benefits from the Homestead Act, you need to call the Lifeline agent at 1-800-440-9853 and request the Homestead form. You do not need to fill out this form.

2a. Tribal Lands Applicant: I participate in one of the above programs or one of the following programs (please check box):

- | | |
|--|---|
| <input type="checkbox"/> National School Free Lunch Program | <input type="checkbox"/> Temporary Assistance for Needy Families (TANF) |
| <input type="checkbox"/> Bureau of Indian Affairs General Assistance | <input type="checkbox"/> Head Start (Income qualified only) |

and I live on the following federally recognized tribal land **(required):**

3. PLEASE READ AND SIGN THE FOLLOWING STATEMENT

- My telephone service is listed in my name;
- The above address is my primary residence, not a second home or business;
- If, in the future, I no longer participate in at least one of the above programs, or if any of the information in this Application changes or no longer applies, I will notify AT&T Wisconsin at the number on this form
- I authorize AT&T Wisconsin or its duly appointed representative to access any records required to verify these statements in order to confirm my continued participation in the above Plan.

Signature _____ Date: _____

4. MAIL OR FAX SIGNED APPLICATION TO:

AT&T Wisconsin Lifeline
PO Box 4600
Waterloo, IA 50704-9914
or fax application to 1-800-295-7495
For TTY Service call: 1-800-980-4889. For Spanish call: 1-800-910-1030.