

Family Code: \_\_\_\_\_

Shopping time \_\_\_\_\_

## 2023 Pulaski County Christmas Store Application

### Total household income eligibility guidelines

Number of Family Members	Total Gross Monthly Income (Yearly)
1	\$1,823 (\$21,870)
2	\$2,485 (\$29,580)
3	\$3,108 (\$37,290)
4	\$3,750 (\$45,000)
5	\$4,393 (\$52,710)
6	\$5,035 (\$60,420)
7	\$5,678 (\$68,130)
8	\$6,320 (\$75,840)

For each additional family member, add \$428.

Please bring the following documents to the application intake:

- (1) Photo identification – Driver’s license, employment ID, etc.
- (2) Proof of Pulaski County residence – Bills, letters, rent receipt
- (3) Proof of all current household income – Pay stubs, income tax forms, public assistance verification, etc.

### Please complete all information.

Name of person completing form \_\_\_\_\_

Phone \_\_\_\_\_ Email address \_\_\_\_\_

Home address (physical) \_\_\_\_\_

Home address (mailing) \_\_\_\_\_

Does the household receive Food Stamps? \_\_\_\_\_ Yes. If Yes, Amount \$ \_\_\_\_\_ No

### Children age newborn-age 18 (still in high school) living at this address.

Name	Relationship	Age	Date of Birth	SSN last four digits

### Adults (age 18 and over not in high school) living at this address.

Name	Relationship	Age	Employer	Gross salary (monthly, before taxes)
	Self			

Family Code \_\_\_\_\_

	Primary Recipient	Monthly Amount
TANF		
SSI/SSDI		
Unemployment		
Worker's Compensation		
Pension/Retirement/Other		
Child/Spouse Support		

**Other Family Income \$** \_\_\_\_\_

**Total Monthly Family Income \$** \_\_\_\_\_

My signature below authorizes the Pulaski County Christmas Store and its volunteers to obtain and release verification necessary to establish my eligibility for assistance and to allow other agencies to determine eligibility for their services. The information on this application is correct to the best of my knowledge. False information will automatically disqualify my family from receiving assistance now and in the future. The age range for children eligible for services through PCCS is newborn through 18 years if in high school. Only one application is accepted per household. More than one family in the same household counts as one application. Bikes and electronics will not be provided by PCCS this year.

**I acknowledge that I understand this statement.**

Parent/Guardian Signature \_\_\_\_\_ Code # \_\_\_\_\_

PCCS volunteer \_\_\_\_\_ Date \_\_\_\_\_

For questions, email [pulaskiccs2020@gmail.com](mailto:pulaskiccs2020@gmail.com).