

Share the Warmth

WON'T YOU PLEASE HELP?

Name _____

Address _____

City _____ State _____

Zip _____ Phone _____

I will contribute \$_____ per month to Project Share.

I understand this amount will be included with my monthly utility bill.

I have enclosed a \$_____ donation to Project Share.

CONTRIBUTIONS TO PROJECT SHARE ARE TAX DEDUCTIBLE

Need assistance? See below for information on the Low Income Home Energy Assistance Program (LIHEAP)



Project Share

helps those less fortunate pay their winter utility bills.

Project Share (PS) is a voluntary energy assistance program that helps people in Muscatine pay their winter utility bills. You can help by adding a regular contribution to your monthly utility payment or by making a donation directly to Project Share. A social service agency will then distribute funds to qualified families. **Fill out and detach this form, then return it to us with your next payment.**

For more information, call MP&W at 263-2631.

CUT & RETURN

ATTENTION: RESIDENTIAL CUSTOMERS! NEED HELP WITH YOUR HEATING BILL?

The 2019-2020 Low-Income Home Energy Assistance Program (LIHEAP) has been established to help qualifying low-income Iowa homeowners and renters pay for a portion of their primary heating costs for the winter heating season. The assistance is based on household income, household size, type of fuel, and type of housing. If you are not sure where to apply, please visit <https://humanrights.iowa.gov/dcaa/where-apply>, contact your local agency:

Community Action of Eastern Iowa, 1903 Park Avenue #18, Muscatine, IA 52761
Phone: 563-263-9290 or 866-263-9290

or write to: LIHEAP, Iowa Department of Human Rights, Capitol Complex, Des Moines, IA 50319

WHEN TO APPLY

- **Elderly** (60 & over) **and/or disabled:** October 1, 2020 to April 30, 2021.
- **All other households:** November 1, 2020 to April 30, 2021.

WHAT TO TAKE:

- **Proof of Income (for all household members age 19, and over)**
Check stubs from previous 30 days,

award letter from Social Security or 2019 tax return.

- **Social Security numbers for all household members (documentation required).**

- **Recent heat bill**
- **Recent electric bill**

WAGE EARNERS:

Please bring copies of your check stubs

for the 30 day period preceding the date of application, or a copy of your federal income tax return.

FIXED INCOME:

This income may include: Social Security Benefits, Supplemental Security Income, Family Investment Program, Veteran's Assistance, Unemployment Insurance, and pensions. Please bring copies of your check stubs from the previous 30 days.

INCOME MAXIMUMS

<i>Household Size</i>	<i>Annual Gross Income</i>
1	\$22,330
2	\$30,170
3	\$38,010
4	\$48,850
5	\$53,690
6	\$61,530
7	\$69,370
8	\$77,210

For households with more than eight members, add \$7,840 for each additional member.

SELF-EMPLOYED/FARMERS:

Please bring a copy of your most recent federal income tax return.

FIP RECIPIENTS:

Please bring your current DHS Notice of Decision or contact your local office for acceptable document information.

If you receive alimony or child support, it will also need to be verified.

If you would like to help needy families in our community, see above information on MP&W's Project Share.