EF-267-H-A-R01-0611-43000773-1 BOE-267-H-A (P1) REV. 01 (06-11)

ELDERLY OR HANDICAPPED FAMILIES FAMILY HOUSEHOLD INCOME REPORTING WORKSHEET



Lawrence E. Stone Santa Clara County Assessor

Exemptions Unit West Tasman Campus 130 W Tasman Drive San Jose, CA 95134 Ph: (408) 299-6460 exemptions@asr.sccgov.org www.sccassessor.org

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

ADDRESS OR UNIT NUMBER (NO P. O. BOX NUMBERS)		
NAME(S) OF OCCUPANTS	NUMBER OF PERSONS IN FAMILY HOUSEHOLD	INCOME LIMIT
	1	\$89,300
	2	\$102,050
	3	\$114,800
	4	\$127,550
	5	\$137,750
	6	\$147,950
	7	\$158,150
	8	\$168,350
more than one person is residing in a unit, do you consider yourselves a fam NO, report on line 1 below the number of persons in your family. Each non-fa Number of persons in family household: I certify (or declare) under penalty of perjury under the laws of the State of year did not exceed \$ (Enter the amount of the income line)	amily member must complete a separate complete complete a separate complete complete a separate complete complet	come for the prior cale

NOTE TO MANAGER: RETAIN THIS FORM FOR YOUR RECORDS

