ESTIMATED POVERTY LEVEL:

The following information is gathered for organizational and funding purposes only. All information will be kept confidential and will not affect your Care Receiver eligibility status or any services provided to you by Good Shepherd Caregivers.

Family Size	Annual	Monthly	Weekly	Below Poverty?
1	\$14,850	\$1,238	\$286	
2	\$20,025	\$1,669	\$385	
3	\$25,200	\$2,100	\$485	
4	\$30,375	\$2,531	\$584	
5	\$35,550	\$2,963	\$684	
6	\$40,725	\$3,394	\$783	
7	\$45,913	\$3,826	\$883	
8	\$51,113	\$4,259	\$983	
Each Add'l	\$5,200	\$433	\$100	

125% of the Federal Poverty Level Guidelines

(Circle one) Family Size: ______ Household Income: ______ (Weekly Monthly Yearly) **ACCORDING TO THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES 2016 POVERTY GUIDELINES**

All data is used for grant and statistics only. Income level will not be associated with the individual, but only anonymous.