

2023 Help Them to Hope (HTTH) Application for Assistance

Help Them To Hope (HTTH) is a non-profit holiday project to help people in need with gifts of food, and toys. **Applications for assistance must include current copy of income and be signed by the head of household.** **Applications must be received by November 30, 2023.** **Incomplete applications will not be processed.** **Please do not send original documents for copy of income, they will not be returned.** Mail this completed application to: HTTH, PO Box 55, Ontario OR 97914, drop it off at the Oregon Dept of Human Services (ODHS), 186 East Lane, Ontario OR 97914, Payette Nazarene Church - 1980 7th Avenue North. Payette, ID, 83661, or email it to helpthemtohopecharity@gmail.com. If HTTH is able to serve you, volunteers will deliver items to your home on **Thursday, December 14, 2023.** **By signing and/or submitting this document you consent to the release of basic information to Help Them To Hope Volunteers.** **One delivery per address.**

Name:	Head of Household Signature is Required!			
Street Address:	I have provided true and accurate information about all members of my household, including all of our income, expenses and need for this assistance.			
City, State & Zip:				
Phone # (required):	Total Persons in Home:	Total Children:		
List EVERYONE in household: Last Name, First Name	Gender	Age	Disabled	Social Security #
Self	M / F		Yes / No	
Spouse	M / F		Yes / No	
Child	M / F		Yes / No	
Child	M / F		Yes / No	
Child	M / F		Yes / No	
Child	M / F		Yes / No	
Other Adults in Home	M / F		Yes / No	
Other Adults in Home	M / F		Yes / No	
Mark Your Needs Below:	List ALL Income & Expenses Below. Must attach COPY of income -- your originals will not be returned!			
<input type="checkbox"/> Food Box for Individual / Couple	List gross income received each month; include all Wages, Unemployment, Social Security, Disability, Pensions, Child Support, Stipends, and Gifts of Money:			
<input type="checkbox"/> Food Box for Family of 3 or More	List total amount of Food Stamps / SNAP received by all members of the household:			
<input type="checkbox"/> Toys for Children	List amount of <input type="checkbox"/> Rent or <input type="checkbox"/> Mortgage paid each month (do not list if it is paid by someone else)			
__ Bikes for children # if available _____	List all heating costs you pay (oil, gas, wood, electric)			
Items listed above are subject to availability!				
Do you live upstairs? ___ Yes ___ No	Net Income = \$			

Referred By:	Approved	Initial	Initial	Initial	Initial	ID Number

ONE DELIVERY PER ADDRESS