

POSSIBLE SSP "LIVING ARRANGEMENT" CASE

Please complete this form only if you live alone (or pay all of the household expenses):

I am an elder (65+) and receive[d] less than \$128.82 from SSP

Or

I am disabled (under 65) and receive[d] less than \$114.39 from SSP

Name: _____

Address: _____

Tel. No.: _____

Email: _____

Send to:

Peter Benjamin
Community Legal Aid
One Monarch Place, 4th Floor
Springfield, MA 01144
pbenjamin@cla-ma.org