



LIONS AFFORDABLE HEARING AID PROJECT (Lions AHAP) Hearing Aid Order Form

Club president or hearing chair name Jim Maberry
 Club/district/foundation Kingman Mohave Lions Club
 Mailing address PO BOX 4316
 City Kingman State AZ Zip code 86402
 Daytime phone _____ E-mail address lions@kingmanlions.org

Item	Cost	Qty.	"Shell" Colors	Total Cost
Rexton Targa 3 P digital behind-the-ear hearing aid	<i>Introductory price</i> US\$200 ea.		<i>Circle one</i> Beige Brown	
Rexton Targa 3 HP digital behind-the-ear hearing aid	<i>Introductory price</i> US\$200 ea.		<i>Circle one</i> Beige Gray	
Does the hearing care professional need Send software? <input type="checkbox"/> Cables needed? <input type="checkbox"/>				NC
User instruction booklet: Spanish <input type="checkbox"/> English <input type="checkbox"/>				NC
<i>Send completed forms to:</i> Lions Affordable Hearing Aid Project (Lions AHAP) Lions Clubs International Foundation 300 W. 22nd Street Oak Brook, IL 60523-8842 Phone: 1-630-468-6771 Fax: 1-630-706-9124 E-mail: LionsAHAP@lionsclubs.org		Total from above \$ _____		
		<i>Shipping charges are required</i>		
		1 aid US\$18.00 \$ _____		
		2 aids US\$20.00 \$ _____		
		Add \$2 for every additional aid \$ _____		
		Total	\$ _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <i>Please note that the shipping charges can change without notice</i> </div>				

<p>Payment required: Check/money orders must be in U. S. dollars, drawn on a U. S. bank and payable to LCIF AHAP.</p> <p>Form of payment</p> <p> Money order <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Credit card type: Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Name on card _____ Card number _____ Expiration _____ Code _____ Signature _____ </p>	<p>Contact information for audiologist/board certified hearing instrument specialist:</p> <p>Name _____</p> <p>Business _____</p> <p>Address (No PO Box) _____</p> <p>City _____</p> <p>State _____ Zip Code _____</p> <p>Phone _____ Fax _____</p> <p>E-mail _____</p>
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Note: Ear fitting fees and some other miscellaneous expenses are the responsibility of the applicant and are not covered under this program; these costs could be \$150 or more per hearing aid.

Checklist: (1) Payment (2) Lions AHAP order form (3) Application form for candidates (4) Income and Asset form for candidates

Lions Affordable Hearing Aid Project Application Form for Candidates

Name _____ Birth date _____

Address _____ Apt. # _____

City _____ State _____ Zip code _____

Insurance: Name and policy numbers of *any/all* health insurance policies

List Names and Ages of Everyone in Your Household:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you wear a hearing aid? Yes No

If yes, why do you need one? _____

Is the Applicant employed? Yes No

If no, why? _____

If yes, employer: _____

Applicant Must Read and Sign This Statement:

I fully understand these services are limited to individuals unable to pay for or receive hearing aids from other sources of assistance. In consideration of these services, I release and discharge all persons rendering such services from any claims I may have arising from services so rendered. I am aware that a hearing aid billed to me prior to the approval of this application will not be paid for by this service.

I also understand my application may be reviewed by the Lions Club and hearing professionals. These forms will be kept on file by the local Lions, the hearing care professional and LCIF. The documents will be kept confidential and not shared with third parties, such as insurance companies.

All information on and attached to this application is true and correct to the best of my knowledge.

Applicant's Signature
(Parent/Guardian Signature if person is under 18)

Witness
(If applicant signs with an "X")

Lions Affordable Hearing Aid Project Income & Asset Form for Candidates

Name _____ **Birth Date** _____

Address _____ **Apt. #** _____

City _____ **State** _____ **Zip** _____

Monthly Gross Income <i>(Income before taxes / deductions)</i>		Monthly Expenses <i>(Monthly average)</i>	
Salary of Candidate	\$	Rent/Mortgage	\$
Salary of Spouse	\$	Utilities	\$
Salary of Parent	\$	Food	\$
Social Security Benefits	\$	Phone	\$
Retirement Pension	\$	Medicine	\$
Income from Other Family	\$	Car/Transportation	\$
Food Stamps	\$	Child Care	\$
Investments	\$	Home Insurance	\$
Assets	\$	List/Charge Cards	\$
Other Income	\$		\$
	\$		\$
Total Monthly Income	\$	Total Monthly Expenses	\$

All information on and attached to this application is true and correct to the best of my knowledge.

Applicant Signature
(Parent/Guardian Signature if person is under 18)

Witness
(If Applicant signs with an "X")

To be completed by Lions Club:

Date Approved _____ **Date Bill Received** _____ **Cost** _____

Date Paid _____



Lions Affordable Hearing Aid Project

Income Eligibility & the Federal Financial Poverty Level

Each Lions club decides the cut-off figure for the income and assets of a candidate. LCIF recommends that Lions clubs base their decision on whether or not the candidate's income and assets fall under a percentage above the federal poverty level. The percentage is determined by the Lions club.

The table shows the poverty level per number of people in a household. The poverty level accounts for funding for food for one year. It does not include funds for shelter, clothing or transportation.

The percentages above the poverty level illustrate possible cut-offs. Some clubs use the poverty level, others use 185% or 190% above the level. If candidates have incomes and assets above 200%, Lions clubs must contact Lions AHAP.

Table illustrates incomes at different percentages above Federal Poverty Levels				
Persons in Household	**US Federal Financial Poverty Level [†]	125 % above Poverty Level	150 % above Poverty Level	175 % above Poverty Level
1	\$10,830	\$13,538	\$16,245	\$18,953
2	14,570	18,213	21,855	25,498
3	18,310	22,888	27,465	32,043
4	22,050	27,563	33,075	38,588
5	25,790	32,238	38,685	45,133
6	29,530	36,913	44,295	51,678
7	33,270	41,588	49,905	58,223
8	37,010	46,263	55,515	64,768

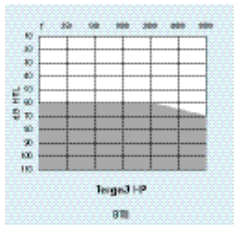
**Figures are for the 48 contiguous states and D.C.

*Source is US Department of Health and Human Services, 2009 Table

Targa₃ HP



Suggested fitting range:



Targa₃ HP (High Power) Digital BTE

Technical Description:

The Targa₃ HP (High Power) is one of the most advanced mid-level, high power BTE digital hearing instruments. The Targa₃ HP is a two channel, three memory instrument featuring Adaptive Noise Reduction and Adaptive Feedback Management to help maximize listening comfort. Other standard features include Power on Delay, Microphone Noise Reduction, fully adjustable compression and gain parameters, and Power Boost.

Fitting Recommendation:

Targa₃ HP BTE is an excellent solution for severe to profound hearing losses.

ANSI S3.22-1996			
MAXIMUM POWER OUTPUT	Peak (AGC off)	dB OSPL90	138
	HF-average (AGC off)	dB OSPL90	132
MAXIMUM POWER OUTPUT	Peak (AGC -9 dB)	dB OSPL90	130
	HF-average (AGC -9 dB)	dB OSPL90	122
GAIN (Input at 50 dB)	Peak	dB	78
	HF-average	dB	69
REFERENCE TEST GAIN		dB	45
FREQUENCY RESPONSE		Hz	100-4600
COMPRESSION	Attack time (AGC -21 dB)	ms	VARIABLE
	Release time (AGC -21 dB)	sec	VARIABLE
COMPRESSION	Attack time (AGC -9 dB)	ms	3
	Release time (AGC -9 dB)	sec	40
TOTAL HARMONIC DISTORTION	Maximum	%	<10
EQUIVALENT NOISE LEVEL		dB SPL	<33
INDUCTION COIL SENSITIVITY	HFA-SPLITS@31.6 mA/m		
	Left/Right	dB SPL	104/105
BATTERY DRAIN (maximum)	at RTG., Input 65 dB SPL	mA	±2.4
TYPICAL BATTERY LIFE	Type 675 zinc air	hrs	264

Standard Features:

Fully digital WDRC amplifier
 Three programmable memories
 Two frequency bands with two additional tone controls
 Two compression channels
 Adjustable crossover frequency
 High power fitting rationales
 Adaptive noise reduction
 Adaptive feedback management
 Microphone noise reduction
 Programmable volume control
 Programmable telecoil
 Automatic audio input program
 Power boost programming option
 Battery door or push button on/off switch
 Power on Delay
 Memory alert tone
 Low battery alert tone
 Type 675 battery
 Compatible with FM, MLX, and other wireless technology
 Beige or grey housing

Available Options:

Transparent eyeglass adapter
 Transparent audio shoe
 Small earhook with damper

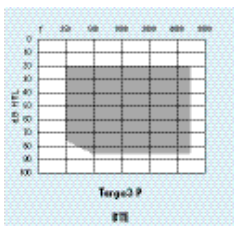
5010 Cheshire Ln. N.
 Suite 2
 Plymouth, MN 55446
 800-876-1141
 Fax: 763-553-9129
www.rexton-online.com



Targa₃ P



Suggested fitting range:



Targa₃ P Digital BTE

Technical Description:

Targa₃ P BTE is a high power, mid-level 100% digital signal processing instrument containing two channels with up to three independently programmable memories. Advanced features of the Targa₃ P BTE include noise suppression and an adaptive anti-feedback notch filter. Programming features include adjustments for own voice, speech, soft sounds, and loud sounds. A fine-tuning screen offers complete control of gain in each channel, compression adjustments for kneepoint, ratio and compression method in each channel, a crossover frequency control, as well as an AGC-O adjustment to control output. The adaptive anti-feedback notch filter is an excellent solution for potential feedback. The Targa₃ P BTE has an automatic audio input program that is compatible with both FM and MLX systems.

Fitting Recommendation:

Targa₃ P BTE is an excellent solution for mild to severe hearing loss of various configurations such as high frequency, sloping, flat and reverse curve.

ANSI S3.22-1996			
MAXIMUM POWER OUTPUT	Peak	dB OSPL90	130
	HF-average	dB OSPL90	127
GAIN (Input at 50 dB)	Peak	dB	65
	HF-average	dB	60
FREQUENCY RESPONSE		Hz	120-5800
COMPRESSION	Attack time	ms	VARIABLE
	Release time	ms	VARIABLE
TOTAL HARMONIC DISTORTION	Maximum	%	<10
EQUIVALENT NOISE LEVEL		dB SPL	<33
INDUCTION COIL SENSITIVITY	HFA-SPLITS@31.6 mA/m		
	Left/Right	dB SPL	112/115
BATTERY DRAIN	at RTG., Input 65 dB SPL	mA	1.0
BATTERY LIFE	Type 13 zinc air	hrs	298

Standard Features:

Fully digital WDRC amplifier
 Three programmable memories
 Two frequency bands with two additional tone controls
 Two compression channels
 Adjustable crossover frequency
 Adaptive noise reduction
 Adaptive feedback management
 Microphone noise reduction
 Programmable volume control
 Programmable telecoil
 Automatic audio input program
 Battery door on/off switch
 Push button on/off switch
 Power on Delay
 Memory alert tone
 Low battery alert tone
 Type 13 battery
 FM and MLX compatible
 Beige, grey, or tobacco housing

Available Options:

Eyeglass adapter
 Audio shoe
 Small earhook with damper
 Multi-color programming input cover

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