

### For Your Convenience - Our Documentation Check List

To determine if you qualify for assistance, you will need to show proof of your income, and also supply documentation necessary for determination. Please fill out the attached application in full, sign it, and send the application along with a copy of each of the following documentation (those that are applicable) for your

*Note: We can not use bank statements as proof of income. The guidelines listed are the minimum for NYS*

- 1.) Please complete all three (3) pages of the application
- 2.) Copies of two (2) consecutive paystubs or a letter from your employer indicating all gross income
- 3.) Self-Employment Federal tax return with schedule c and year to date profit and loss.
- 4.) Copy of unemployment benefits statement from DOL.
- 5.) Copy of disability compensation benefit statement/award letter.
- 6.) Copy of social security award letter.
- 7.) Copy of pension, retirement income award letter or 1099.
- 8.) Rental Income 1099 or signed letter attesting monthly income or copy of lease.
- 9.) If an application for state assistance, (e.g. Medicaid, State Health Exchange)   
has been made in the last 60 days and you have received a decision, please provide a copy.
- 10.) Federal tax return 1040 for dependents.
- 11.) No Income - A signed statement of no income
- 12.) If proof of residency is required, please send one of the following: NY driver's license, property   
tax bill, lease for property, or a utility bill

Please use the above checklist to be sure we have all the information we need to quickly and correctly process your application. It is important that your application be complete, and that all necessary documentation is received. All information you provide to us is confidential.

If you have any questions, please contact us at (518) 481-2241

**Drop it off at:** 10 Third Street, Malone, NY 12953

**Mail it to:**

UVMHN AHMC Patient Financial Services

133 Park Street, PO Box 429

Malone, NY 12953