



INCOME WITH NO TAX DEDUCTIONS

I, _____ have earned \$_____ in the last 30 days and no taxes were withheld.

Signed _____

Date _____

INGRESOS SIN DEDUCCIÓN DE IMPUESTOS

Yo, _____ he ganado \$_____ en los últimos 30 días y no me quitaron impuestos.

Firma _____

Fecha _____

The Medical Access Program serves the healthcare needs of eligible residents in Travis County and is funded by Central Health



CENTRAL HEALTH