

PARRISH MEDICAL CENTER
951 N. WASHINGTON AVE.
TITUSVILLE, FL 32796
321-268-6158

TO APPLY FOR FINANCIAL ASSISTANCE, YOU MUST BRING THE FOLLOWING DOCUMENTS WHICH ARE **APPLICABLE TO YOUR FINANCIAL SITUATION** IN ORDER TO COMPLETE YOUR APPLICATION:

- 3 MONTHS PROOF OF INCOME (THIS INCLUDES RECENT CONSECUTIVE PAYSTUBS FOR PATIENT, AND SPOUSE (IF APPLICABLE)...**MUST INCLUDE GROSS INCOME**BANK STATEMENTS WILL NOT BE USED AS PROOF OF INCOME****
- PROOF OF UNEMPLOYMENT
- CHILD SUPPORT RECEIVED (YOU MAY OBTAIN AT COURTHOUSE)
- ANNUAL STATEMENT OF SOCIAL SECURITY, PENSION, OR ANNUITY
****BANK STATEMENTS WILL NOT BE USED AS PROOF OF BENEFITS****
- LAST YEAR'S COMPLETED TAX RETURN **ALL PAGES**
- PROOF OF RESIDENCY AND IDENTIFICATION (DRIVER'S LICENSE OR PICTURE ID FOR ALL ADULTS, AND SOCIAL SECURITY CARD FOR ALL MEMBERS OF HOUSEHOLD)
- LAST 3 MONTHS CONSECUTIVE BANK STATEMENTS...MUST PROVIDE ALL BANK ACCOUNTS ON WHICH YOUR NAME IS LISTED (**CHECKING/ SAVINGS/MONEY MARKET, ETC.**)
ALL PAGES ARE REQUIRED!!!MUST BE IN STATEMENT FORMAT, WILL NOT ACCEPT TRANSACTION HISTORY**
- LETTER OF SUPPORT IF ANYONE IS PROVIDING YOU WITH ROOM/BOARD OR ANY FINANCIAL ASSISTANCE TO MAINTAIN YOUR LIVING SITUATION
- IF SELF-EMPLOYED** YOU WILL BE REQUIRED TO SUBMIT ADDITIONAL DOCUMENTATION
- PLEASE COMPLETE ALL ATTACHED DOCUMENTS AND RETURN TO THE BUSINESS OFFICE IN PERSON TO COMPLETE REMAINING PROCESS

****IF YOU DO NOT BRING THE REQUIRED DOCUMENTS, YOU MAY HAVE TO RETURN TO COMPLETE THE FINANCIAL ASSISTANCE PROCESS AT ANOTHER TIME.**

FINANCIAL ASSISTANCE DOCUMENT LIST