

Need Health Coverage?

We can help you enroll in person or over the phone:

- ☒ **Medi-Cal/CalFresh**
(Year-round)
- ☒ **Covered California**
(In the fall)
- ☒ **Covered California Special Enrollment** (year round)
Qualifying Life Events (income change,
got married/divorced, new baby, among others)

For more information or to schedule an appointment please call:

1-855-494-4658

Leave a message and we will return your call.

**Please prepare for your phone or in person appointment,
have the documents available from the following list**

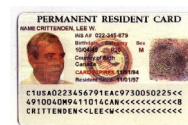
Proof of income
(all you have available)

Earnings									
Rate	Month	Regular Hours	Overtime	Regular	Overtime	Gross Pay			
\$5.75	Sept	160	0	\$1,360.00	0	\$1,360.00			
Deductions									
FICA	SDI	FIT	SIT	INS	Ret	Net Pay			
\$120.00	\$27.20	\$100.00	\$61.20	\$27.20	\$91.60				
FICA - Social Security SD - State Disability Insurance FIT - Federal Income Tax SIT - State Income Tax INS - Insurance Ret - Retirement									

Identification



Proof of Residency status
(the ones that apply to you & your family)

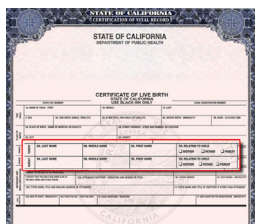


- Pay Stubs for last month
- Income Tax Declaration
- W-2 form

- California Driver License
- Matrícula Consular
- Any official unexpired Identification

- Work Permit
- Residency card (Green Card)
- Citizenship Certificate or American Passport

Birth Certificate from Native Country (For Children)

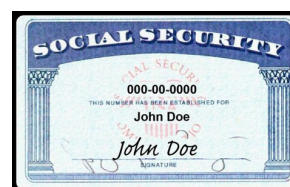


Proof of Address

- Electricity, cable, rent bill



Social Security Number or ITIN Number (The one available for each applicant)



Enrollment Assistance Service at no Cost

¿Necesita Cobertura Médica?

Podemos ayudarle a inscribirse en persona o por teléfono:

- ☒ **Medi-Cal/CalFresh**
(Todo el año)
- ☒ **Covered California**
(En el otoño)
- ☒ **Inscripción especial de Covered California** (todo el año)
Eventos en su vida que son aceptables (cambio en sus ingresos, casamientos/divorcios, nuevo bebé, entre otros)

Para más información, o para hacer una cita, por favor llame al:

1-855-494-4658

Déjenos un mensaje y le regresaremos la llamada.

Por favor prepárese para su cita por teléfono o en persona, tenga los documentos disponibles de la siguiente lista

Prueba de ingresos (todo lo que tenga disponible)

Earnings						
Rate	Month	Regular hours	Overtime	Regular	Overtime	Gross Pay
\$8.50	Sept	160	0	\$1360.00	0	\$1360.00
Deductions						
FICA	SDI	FIT	SIT	RHS	Net	Net Pay
\$120.00	\$27.20	\$108.00	\$61.20	\$27.20	\$81.60	
FICA - Social Security 15.3% - State Income Tax 1.5% - Disability 0.5% - Insurance 0.5% - Retirement 1.5% - Health Insurance 1.5% - Life Insurance 1.5%						

6553-P U.S. Earnings and Taxes Statement and Worksheet		2019
Name: [Redacted] Address: [Redacted] City: [Redacted] State: [Redacted] Zip: [Redacted]		
Employer: [Redacted] Address: [Redacted] City: [Redacted] State: [Redacted] Zip: [Redacted]		
Date: [Redacted]		
Earnings: [Redacted]		
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Total Tax		

Identificación

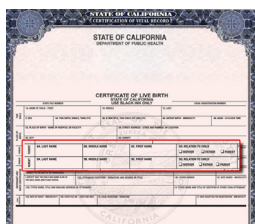


Prueba de estado de residencia (todas las que conciernen a Ud. y su familia)



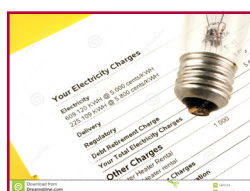
- Talón de cheque (último mes)
- Declaración de impuestos
- Formulario W-2
- Licencia para conducir de California
- Matrícula Consular
- Cualquier tipo de Identificación (sin vencer)
- Permiso de trabajo
- Tarjeta de residencia (Green Card)
- Certificado de ciudadanía o Pasaporte Americano

Acta de nacimiento del país de origen (Para los niños/as))

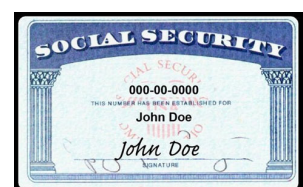


Prueba de domicilio

- Recibo de luz, cable o la renta



Número del seguro social o Número de ITIN (El disponible por cada solicitante)



Servicio de asistencia para inscripciones sin costo alguno