

	•		, ipplication	Services Commission
Supplement al Nutrition Assistance Program (SNAP)	Temporary Assistance for Needy Families (TANF)	Health Care (Medicaid, CHIP, or Healthy Texas Women)	Medicaid for the Elderly and People with Disabilities	DOCUMENTS NEEDED TO SHOW PROOF Send the documents that are check marked under the program(s) for which you are applying or renewing. You only need to send documents that apply to your situation. For example, if you are applying or renewing for SNAP, but do not have a bank account, we do not need bank statements.
✓	√	✓	✓	Identity - Valid driver's license or Department of Public Safety ID card. Note: If you have an authorized representative, your authorized representative will need to provide proof of his or her identity, plus proof of your identity.
\checkmark	✓	✓	\checkmark	Social Security - Social Security number/card from the Social Security Administration for each person.
	√	✓	√	Citizenship - U.S. passport, Certificate of Naturalization, U.S. birth certificate, hospital record of birth or Medicare card.
✓	✓	✓	✓	Qualified Alien/Non-Citizenship Status - Alien registration card, documentation from the Bureau for Citizenship and Immigration Services (formerly INS).
✓	✓		√	Residence - Utility bills or utility company records, rent receipt or statement from non-relative landlord, mortgage receipt or statement from mortgage company or a valid Texas driver's license or Department of Public Safety (DPS) identification card.
✓	✓	√	√	Legal Representative - Power of attorney, guardianship order, court order or similar court documents.
✓	✓	✓	✓	Earnings - Pay stubs or copy of checks dated within sixty days from the date you submit your application or renewal application, a statement from employer that includes their name, address and phone number or self-employment records.
✓	✓	✓	√	Social Security, Pension, Veterans Administration, Supplemental Security Income, Workers' Compensation or Unemployment Benefits - Award letter or pay stubs.
	✓	✓		Alimony Expenses - Divorce decree, court order, court records, statement from the individual who is receiving the alimony, last year's income tax return or other item that shows proof.
		✓		Student Loan Interest, Educator Expenses, Health Savings Accounts, Moving Expenses, Tuition and Fees - Last year's income tax return.
✓	√		√	Child Support You Pay - Divorce decree, court order or copy of district clerk record.
✓	✓		✓	Child Support You Get - Copy of district clerk record or letter from parent who pays showing any child support amounts and dates paid, including the person's name, address, telephone number, signature and date.
✓	✓	✓	√	Loans, Gifts, Contributions - Promissory note, loan agreement, statement from person providing the money that includes the person's name, address, telephone number, signature and date.
✓	✓		✓	Bank Accounts - Current statements for all accounts.

Documents To Send With Your Application



			1 1	Services Commission
Supplement al Nutrition Assistance Program (SNAP)	Temporary Assistance for Needy Families (TANF)	Health Care (Medicaid, CHIP, or Healthy Texas Women)	Medicaid for the Elderly and People with Disabilities	DOCUMENTS NEEDED TO SHOW PROOF Send the documents that are check marked under the program(s) for which you are applying or renewing. You only need to send documents that apply to your situation. For example, if you are applying or renewing for SNAP, but do not have a bank account, we do not need bank statements.
✓	\checkmark		\checkmark	Stocks, Bonds, Trusts, Annuities - Trust agreement, annuity contract, stock certificate, bond instrument or current statements.
✓	✓		✓	Real Estate, Oil, Gas, Mineral Rights - Current tax statements, division orders, deeds or royalty statements.
✓		✓	✓	Medical Expenses - Medical bills, receipts or statements from the provider.
	√		√	Insurance Policies - Copies of life and burial policies; statements from the insurance provider showing the current value.
✓			✓	Rent/Mortgage - Copies of checks or check stubs, statement from mortgage lender or landlord. Also, if you rent your home, please provide the name, address and telephone number of your landlord.
		✓	✓	Health Insurance - Information about current private health insurance or any private health insurance available to you. Tell us the company name, the name of the policy holder, policy number, company phone, group number, and if you no longer have it, the end date of the coverage, and the reason the coverage ended.
✓			\checkmark	Utilities - Your most recent utility bills showing your name and current address.
✓				Dependent Care Expenses - Copies of check or check stubs showing when and how often you pay. Include a signed and dated statement from the person you pay showing that person's address and telephone number, as well as when and how often you pay.
✓		✓		Pregnancy - For SNAP, you need to provide copies of medical records confirming the pregnancy, or call 2-1-1 and request Form H3037, Report of Pregnancy, or ask for more information about how you can provide proof. For Medicaid programs, you can send us a letter telling us the month your pregnancy started, the number of babies you expect from this pregnancy, and your due date (the date you expect to deliver). You also can give us this information by phone. If you do not know the information, ask your doctor or other medical professional to fill out FormH3037, Report of Pregnancy.
	✓			Domicile - We must have proof that the child lives with you, such as a signed statement from your landlord or a non-relative neighbor that includes his or her name, address and telephone number.

Documents To Send With Your Application



Supplement al Nutrition Assistance Program (SNAP)	Temporary	INDAICSIA	for the Elderly and People with	DOCUMENTS NEEDED TO SHOW PROOF Send the documents that are check marked under the program(s) for which you are applying or renewing. You only need to send documents that apply to your situation. For example, if you are applying or renewing for SNAP, but do not have a bank account, we do not need bank statements.
	√			Child Immunizations - Provide immunization records or proof of immunizations for each TANF child under the age of six. If you believe you are exempt from this requirement because of your religious or conscientious beliefs, call 2-1-1 for the information we will need.

We will contact you if we need more information or if you need to take any action. Call 2-1-1 if you have questions.