

*** * * * * THIS IS NOT AN APPLICATION * * * * ***

PROPERTY TAX REDUCTION WORKSHEET ONLY

**MEDICAL EXPENSE STATEMENT
(only show amounts paid out of pocket in 2019)**

APPLICANT NAME _____ COUNTY _____

MEDICAL INSURANCE 1 Year Premium
(do not include life, funeral, or accident insurance)

1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
		TOTAL\$ _____

NAME OF DOCTORS (dentists, eye, ear, etc)
(do not list insurance payments directly to doctors, etc)

1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
		TOTAL\$ _____

PRESCRIPTION DRUGS (name of pharmacy)

1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
		TOTAL\$ _____

HOSPITAL/AMBULANCE/NURSING HOME, ETC
(include transportation cost and in-home nursing service)

1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
		TOTAL\$ _____

MILEAGE:

FROM: _____ TO: _____ @ .20 / MILE \$ _____ TOTAL _____

Total Medical Expenditures \$ _____

Signature _____ Date _____

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INCOME STATEMENT

NAME _____

ADDRESS _____ PHONE # _____

IF FILING INCOME TAXES, HAVE A COPY OF FEDERAL 1040 FORM AVAILABLE

BRING ALL INCOME FORMS (SS 1099, INTEREST, RETIREMENT, ETC)

BRING IN A CURRENT VA PERCENTAGE LETTER FOR VA DISABILITY

BRING IN SOCIAL SECURITY LETTER OF DIABILITY IF UNDER 65 & FIRST TIME APPLING FOR PTR

FIRST TIME APPLICANTS MUST BRING A PICTURE I.D. AND SOCIAL SECURITY CARD

TOTAL INCOME LISTED ON 1040 Form _____

Social Security Income-Applicant _____

Social Security Income-Spouse _____

SSI Letter showing last year income _____

Pensions, Retirement Income _____

Health Welfare Income _____

Interest Income not included on 1040 Form _____

Wages not included on 1040 Form _____

Unemployment Income _____

Any Other Income _____

TOTAL ANNUAL INCOME (2019) _____

LIST MEDICAL EXPENSES ON OTHER SIDE

Apply January 1 thru April 15 each year. \$31,280 or less

Contact: Twin Falls County Assessor
630 ADDISON AVE W, SUITE 1300
FIRST FLOOR, SOUTH SIDE
P O Box 265
Twin Falls, Idaho 83303
208-736-4010