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**List of Acceptable Documents for Eligibility Determination**

**Emergency Care Program**

<p><b>Proof of Residency</b></p> <p>Please note: The below documents must show address within the West Orange Healthcare area.</p>	<p><b>Proof of Household Income</b></p> <p>Last 30 days</p>
<p><b>Valid License or ID</b></p>	<p><b>Paycheck stubs of each household member.</b> (Proof of job is not mandatory).</p>
<p><b><u>ONE</u> Current Utility Bill</b> (Cable, Internet, Phone, Water, Electric, Mortgage bill, Rental Agreement).</p>	