CHAVES COUNTY
HEALTHCARE SERVICES
P.O. Box 1597
Roswell, NM 88202-1597
Phone 575-624-6547, 575-624-6545
Fax 575-627-7554

Health Care Director
Jeff Ortega

Joseph R. Skeen Building

COMMISSIONERS
Dara Dana · District 1
T. Calder Ezzell Jr · District 2
Jeff Bilberry · District 3
Richard Taylor - District 4
Michael Perry · District 5

County Manager
Bill Williams

TAX WAIVER

This statement certifies that I am not required by law to file a Federal or State Income Tax Return for the year of _____. ***I understand that I am knowingly providing this information and declare it is true and correct. I understand that Chaves County can and will prosecute me for any false information made knowingly by me and this could constitute a felony charge, which could result in fines and incarceration.***

_____
Adult not required to file (Patient or Claimant)*

_____
Spouse (Joint Return)

STATE OF NEW MEXICO)
)
COUNTY OF _____)

SUBSCRIBED AND SWORN TO before me this _____day of _____, year 20_____.

SEAL

_____
Notary Public

_____
My Commission Expires

*If a patient is a minor child, signature must be from a parent, guardian, or custodial representative.

Revised 2/25/2019