



Division of Family and
Children Services



PeachCare
for Kids

Application for Benefits

Type of Expense (doctor visits, hospital visit, prescriptions, Medicare or health Insurance premiums, glasses)	Amount Owed	Still Owed? Yes/No	Date Paid	Will Insurance Pay? Yes/No
Doctor Visit	350	Yes	/	No

Purpose of the trip (doctor or hospital visit; pharmacy pick-up)	Total miles driven:	Cost of taxi, bus, parking or lodging:
LA Hospital visit	25	50 USD

Do you pay transportation expenses for a dependent child or disabled adult household member? Yes ☒ No ☐

Does anyone 60 years of age or older or disabled have medical expenses for transportation? Yes ☐ No ☒

First Name

John

Middle Initial

Last Name

Meyeritz