

Knox County Community Health Center  
1361 West Fremont Street, Galesburg, Illinois 61401  
309-344-2225 · Fax 309-344-2230 · www.knoxcountyhealth.org

Please bring the following items with you:

- \$10.00
- Picture ID
- Last 30 days of check stubs
- Proof of address
- Last year's 1040 tax forms
- Proof of Child Support (if receive)
- Pt. Information & Medical History Sheets Completed
- If you or spouse receive Social Security bring in the Award Letter-(This is the first letter you received when SS started)
- Denial letter from the local public aid office(IF married bring spouses stub-and any other household income)

**Please make sure you arrive 20-30 minutes early to fill out your paperwork**

Your appointment is on \_\_\_\_\_ at \_\_\_\_\_ am/pm

If you have any questions or if you need to change your appointment you **MUST** call us to reschedule that appointment. If you have two No Shows you will not be rescheduled for 6 months.

If you have any questions please call 309-344-2225 - Thank You!