



# COLORADO

## Medical Marijuana Registry

Department of Public Health & Environment



## Fee Waiver and Tax-exempt Status

### Tax-exempt status allows patients to:

1. Apply for a medical marijuana card without paying the application fee.
2. Purchase medical marijuana without paying Colorado sales taxes.

You may qualify for a fee waiver if your household income is 185% of the Federal Poverty Level\* or less. The chart below indicates the annual adjusted household incomes that qualify.

# in Family	Annual Household Income
1	\$21,775
2	\$29,471
3	\$37,167
4	\$44,863
5	\$52,559
6	\$60,255
7	\$67,951
8	\$75,647
Each additional family member	\$7,696

\*Poverty guidelines are updated periodically in the Federal Register by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2).



# COLORADO

## Medical Marijuana Registry

Department of Public Health & Environment



### Fee Waiver and Tax-Exempt Status

This form must be submitted with a certified copy of your Colorado Tax Return

STAFF ONLY  
  
            
Evaluated

Patient Information			
1. Last Name		2. First Name	
3. Middle Initial		4. Date of Birth	
5a. Mailing Address			5b. Apt/Ste #
6. City	State CO	7. Zip Code	8. County
9. Telephone		10. Email	

11. List all the people in the household who were listed on your Colorado tax return.			
Last Name	First Name	Date of Birth	Relationship to Patient
A.			
B.			
C.			
D.			
E.			
F.			
G.			
H.			
I.			
J.			
K.			
L.			
M.			

I hereby certify that I, the patient, have verified the above information to be accurate and complete and no one other than me (or my legally authorized representative) is submitting this request on my behalf.

12a. Patient's or Authorized Representative's Signature:	12b. Signature Date
--	---------------------