



# AMM Accounting Solutions and Consulting, LLC

1046 E. Pistioa Drive Meridian, Idaho 83642

## EXEMPTION FROM ELECTRON VISIT VERIFICATION (EVV) REQUIREMENT

I certify that I physically live with \_\_\_\_\_.

(state name of individual receiving care)

We both live at (street) \_\_\_\_\_

(city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip) \_\_\_\_\_

\_\_\_\_\_

Signature

Date

Upload signed form via Veryfile (emailing a picture is ok)

Or mail to: AMM Accounting Solutions 1046 E. Pistioa Drive Meridian, ID 83642