

## **Current Income Guidelines**

## **Montana Cancer Screening Program**

For All States and D.C. (Except Alaska and Hawaii)

## 250% of Federal Poverty Level

Family Size	Monthly Income	Yearly Income
1	\$2,529	\$30,350
2	\$3,429	\$41,150
3	\$4,329	\$51,950
4	\$5,229	\$62,750
5	\$6,129	\$73,550
6	\$7,029	\$84,350
7	\$7,929	\$95,150
8	\$8,829	\$105,950

For families/households with more than 8 persons, add \$10,800 for each additional person.

