**Formulario de solicitud y acuerdo de la escala de tarifas móvil**

Nombre del cliente:      

Ingreso anual: # de los miembros del hogar:       

Yo,       , afirmo que la anterior declaración de rentas y dependientes es

preciso en      /     /     .

(mes/día/año) (firma del cliente)

Basado en la escalaa continuación, la responsabilidad sugerida del cliente por sesión es de $      .

Calculadora de escala móvil para 2024

Tamaño del hogar

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Rentas | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 14,580 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| 19,720 | 15 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| 24,860 | 20 | 15 | 10 | 10 | 10 | 10 | 10 | 10 |
| 30,000 | 25 | 20 | 15 | 10 | 10 | 10 | 10 | 10 |
| 35,140 | 30 | 25 | 20 | 15 | 10 | 10 | 10 | 10 |
| 40,280 | 35 | 30 | 25 | 20 | 15 | 10 | 10 | 10 |
| 45,420 | 40 | 35 | 30 | 25 | 20 | 15 | 10 | 10 |
| 50,560 | 46 | 40 | 35 | 30 | 25 | 20 | 15 | 10 |
| 55,000 | 53 | 46 | 40 | 35 | 30 | 25 | 20 | 15 |
| 60,000 | 61 | 53 | 46 | 40 | 35 | 30 | 25 | 20 |
| 65,000 | 70 | 61 | 53 | 46 | 40 | 35 | 30 | 25 |
| 70,000 | 81 | 70 | 61 | 53 | 46 | 40 | 35 | 30 |
| 80,000 | 95 | 81 | 70 | 61 | 53 | 46 | 40 | 35 |
| 75,000 | 110 | 95 | 81 | 70 | 61 | 53 | 46 | 40 |
| 80,000 | 126 | 110 | 95 | 81 | 70 | 61 | 53 | 46 |
| 90,000 | 145 | 126 | 110 | 95 | 81 | 70 | 61 | 53 |
| 100,000 | 160 | 145 | 126 | 110 | 95 | 81 | 70 | 61 |
| 110,000 | 175 | 160 | 145 | 126 | 110 | 95 | 81 | 70 |
| 120,000 | 175 | 175 | 165 | 155 | 145 | 126 | 110 | 95 |
| 130,000 | 175 | 175 | 175 | 175 | 165 | 155 | 145 | 126 |
| 140,000 | 175 | 175 | 175 | 175 | 175 | 175 | 175 | 175 |