

FAMILY ASSISTANCE ADMIN
CHANGE CENTER
PO BOX 19009
PHOENIX AZ 85005

STATE OF ARIZONA PAGE 1 OF 8
DEPARTMENT OF ECONOMIC SECURITY
HTTP://WWW.AZDES.GOV/FAA

OFFICE NUMBER: (855) 432-7587
CASE NUMBER: Y
NOTICE NUMBER:
MAILING DATE: 03/04/20

DEAR

THIS DECISION IS ABOUT YOUR NUTRITION ASSISTANCE (NA)
APPLICATION

NA APPROVED: We approved your NA Renewal application received on
03/03/2020.

The following persons are included in your household. The income, resources, and expenses of these persons are used to determine if you are eligible for NA benefits and the monthly amount you will get.

Name

Date of Birth

/ /

↑
Name must match
the AZ ID / U.S. passport
Booklet!!
oo

BENEFIT AMOUNT

Starting 04/2020 you are eligible for \$62.00. After that you will receive \$62.00 (your monthly benefit amount that you are eligible for may be different than what is showing if there was a change in the number of people in your household, income and/or expenses for the 2nd month. We will send you a separate notice if this is the case).

You are approved through 03/2022.

NOTE: You may get less in benefits if you have an ongoing

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