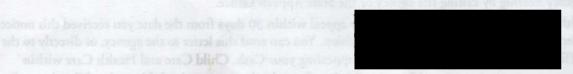
WASHINGTON CTY COMMNTY SERVICE
13000 RAVIN PARKWAY S.
COTTAGE GROVE MN 55016

April 02, 2021 06:57 PM

CASE NUMBER:



Louis Connections and Access

IMPORTANT INFORMATION REGARDING THIS DOCUMENT:

* This information is available in other forms to people with disabilities by calling your county worker,

good cause resear. You can ask to meet informally with agency soft to my to which problem, but this meeting

- * For TTY/TDD users, contact your county worker through the Minnesota Relay at 711 or (800) 627-3529. For the Speech-to-Speech Relay, call (877) 627-3848.
- * The back of this page lists your appeal rights and responsibilities.

NOTICE: A DECISION ABOUT YOUR MFIP BENEFITS

Beginning May 01, 2021 your MFIP grant will change from \$1252.00 to \$199.00 because:

Unearned income changed from \$0.00 to \$1053.00 (Auth:7,17,20,24)

You are eligible for the MFIP Housing Assistance Grant of \$110.00. (We take this action under Minnesota statute 256J.35(a).)

Your grant includes a food portion of \$89.00. (Auth:22.12)

BUDGET FOR MAY BENEFIT HOUSEHOLD SIZE (3) FAMILY WAGE LEVEL. . .\$ 1256.00 GRANT AMOUNT. \$ 199.00 NET EARNED INCOME. . . \$ 0.00 PRORATED GRANT AMT. .\$ DIFFERENCE \$ 1256.00 AMT ALREADY ISSUED. .\$ 0.00 TRANSITIONAL STANDARD. \$ 1142.00 SUPPLEMENT. \$ 0.00 MONTHLY NEED \$ 1142.00 0.00 OVERPAYMENT . . (-)\$ UNEARNED INCOME. . (-)\$ 1053.00 ADJUSTED GRANT AMT. .\$ 199.00 NET DEEMED INCOME. (-)\$ RECOUPMENT AMOUNT (-)\$ 0.00 0.00 CHILD SUPPORT EXCL (+)\$ 0.00 TRIBAL COUNTED INC (-)\$ 0.00 FOOD ISSUANCE . . . \$ 89.00 SUBSIDY/TRIBAL . . (-) \$ 0.00 STATE FOOD BENEFIT. . \$ 0.00 SANCTIONS 0% . . . (-)\$ 0.00 CASH ISSUANCE \$ 0.00 FOOD PORTION \$ 89.00 HOUSING ASST GRANT. . \$ 110.00 TOTAL GROSS INCOME is \$1053.00 this month. If your TOTAL GROSS INCOME will be less than \$494.00 in MAY, call your worker right away.

**** IMPORTANT APPEAL RIGHTS! READ THIS NOW! ****

If you don't agree with the action taken on your case, you can appeal. To keep your benefits until the appeal, you must appeal:

- * Within 10 days or
- * Before the first day of the month when the action takes place.

If you miss the 10 day deadline, you can appeal within 30 days from the date you get this notice (90 days for Supplemental Nutrition Assistance Program (SNAP)), but your benefits will not start again unless you win the appeal. To find out more, read the back of the first page of this notice.

WORKER:

TELEPHONE: