

DFCS - DEKALB CNTY MAIN
PO BOX 4147
ATLANTA GA 30302
1-877-423-4746



DEPARTMENT OF HUMAN SERVICES
DEPARTMENT OF COMMUNITY HEALTH
DEPARTMENT OF PUBLIC HEALTH
DEPARTMENT OF EARLY CARE AND LEARNING

Worker ID: 807289
Worker Name: R.Scott
Worker Phone Number: (470) 727-5798
Case Number: 130876905
Client ID: 761048225

VERIFICATION CHECKLIST

ASSATA SALIM
6539 CARRIAGE LN
STONE MOUNTAIN GA 30087

DATE: 07/29/2023

Report Medicaid Fraud: 1-800-533-0686

The items listed below must be received by due dates mentioned for each. **Without these items we may not be able to determine your eligibility. Your application or active case may be denied or closed, or certain members may not be eligible.**

The following are expenses that can be considered for Food Stamps:

- **Current rent/mortgage payment**
- **Home owner's insurance and/or tax payment**
- **Current gas, electric, telephone, or other utility expenses**
- **Medical expenses (physician, travel, prescriptions, health insurance, premium, hospitalization)**
- **Legal obligation of amount of child support due and paid for someone not in your home**
- **Childcare expenses**
- **Other: (self-employment expenses etc.)**

If you want us to consider these expenses, you must report and verify them. If you do not report or verify your expenses we will not use them to determine your benefit amount.

Submit your verification documents fast and easy by uploading them directly to your Georgia Gateway account at www.gateway.ga.gov. Make sure to include the attached cover letter if you return your verification documents by fax: (404) 478-1871, mail or in-person to your local DFCS office. It is not necessary to include the cover letter if you are uploading your verifications documents using the Georgia Gateway. If you cannot get the requested information or need more time, call your worker, R.Scott, at (470) 727-5798.

Program:		Food Stamps		
Who?	What information is needed?	What Time Period	When due?	What is accepted as proof?

ASSATA SALIM	Self-Employment Expense - OT	Last 2 months	08/08/2023	Business Records, Receipts Note: Letters or statements must include the date, signature, and address or telephone number of the individual completing the statement.
ASSATA SALIM	Self-Employment Income	Last 2 months gross income	08/08/2023	Business Records, Receipts Note: Letters or statements must include the date, signature, and address or telephone number of the individual completing the statement.

Important information:

§ **Policy** used to determine your eligibility can be found at <https://odis.dhs.ga.gov/General>.

§ In accordance with Section 504 of the **Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA)**, the **Department of Human Services (DHS)** provides Reasonable Modifications and Communication Assistance to persons with disabilities. More information can be found at Notice of ADA/Section 504 Rights, at <https://dfcs.georgia.gov/adasection-504-and-civil-rights>.

§ To report Food Stamp and TANF fraud please contact the Office of Inspector General's (OIG) hotline at 1-877-423-4746.

§ **If you need help reading this document** or do not understand English call 1-877-423-4746 for free translation services.