JOSEPH CAMPOS II
DEPUTY DIRECTOR



## STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

Dear DOMINIQUE RILEY,

This letter was generated from https://pais-benefits.dhs.hawaii.gov on Sun Apr 30 10:58:43 HST 2023. Please retain this letter as verification of your SNAP and/or Financial Benefits.

**Letter ID: 1EN4-8FE5-63E4** 

**Issued Benefits from Case Number: 00398794** 

Program	Month	Amount
Supplemental Nutrition Assistance	04/2023	\$ 987
Supplemental Nutrition Assistance	03/2023	\$ 987
Supplemental Nutrition Assistance	02/2023	\$ 538
Supplemental Nutrition Assistance	02/2023	\$ 449
Supplemental Nutrition Assistance	02/2023	\$ 95
Supplemental Nutrition Assistance	01/2023	\$ 538
Supplemental Nutrition Assistance	01/2023	\$ 449
Supplemental Nutrition Assistance	01/2023	\$ 95
Supplemental Nutrition Assistance	12/2022	\$ 538
Supplemental Nutrition Assistance	12/2022	\$ 95
Supplemental Nutrition Assistance	11/2022	\$ 538
Supplemental Nutrition Assistance	11/2022	\$ 95
Supplemental Nutrition Assistance	10/2022	\$ 538
Supplemental Nutrition Assistance	10/2022	\$ 95
Supplemental Nutrition Assistance	09/2022	\$ 472
Supplemental Nutrition Assistance	09/2022	\$ 95
Supplemental Nutrition Assistance	08/2022	\$ 472
Supplemental Nutrition Assistance	08/2022	\$ 95
Supplemental Nutrition Assistance	07/2022	\$ 472
Supplemental Nutrition Assistance	07/2022	\$ 95
Supplemental Nutrition Assistance	06/2022	\$ 472
Supplemental Nutrition Assistance	06/2022	\$ 95
Supplemental Nutrition Assistance	05/2022	\$ 472
Supplemental Nutrition Assistance	05/2022	\$ 95
Supplemental Nutrition Assistance	04/2022	\$ 472
Supplemental Nutrition Assistance	04/2022	\$ 95

\*Benefit amounts are valid as of 04/30/2023