

Hemet Self Sufficiency
541 N SAN JACINTO ST
HEMET, CA 92543-3107

COUNTY OF RIVERSIDE

Date: 07/09/2023

Case Name: Elizabeth Morgan

Case Number: 7188774

Worker Name: Leah Bronson

Worker ID: 33LS352C09

Worker Phone Number: (951) 791-3066 Ext. 23066

VERIFICATION OF BENEFITS

ELIZABETH A MORGAN

1925 E DEVONSHIRE AVE APT 15

HEMET, CA 92544-3109

Physical Address:

Home Phone Number:

Monthly Benefits							
Month/Year	CalWORKs	GA/GR	CalFresh	RCA	MC	CMSP	Family Size
07/22			250		Y	N	1
08/22			250		Y	N	1
09/22			250		Y	N	1
10/22			281		Y	N	1
11/22			281		Y	N	1
12/22			281		Y	N	1
01/23			281		Y	N	1
02/23			281		Y	N	1
03/23			281		Y	N	1
04/23			281		Y	N	1
05/23			281		Y	N	1
06/23			281		Y	N	1
07/23			281		Y	N	1

Current Household Details										
Name	DOB	Aid Code	In the Home	CalFresh	CW	GA /GR	OHC	Medi-Cal	CMSP	MC/CMSP SOC
Elizabeth A Morgan	08/09/1972	M1	Y	Y	N	N	N	Y	N	0.00

Comments