


Reset. 

Check Status of Benefits

* Date of Birth:

(AND)

* Social Security Number (SSN):

Show

(OR)

* DCN (case number):

(Enter eight digit DCN. If you have been provided a DCN that is ten digits do not enter the first two zeros.)

Continue >

Exit

State of Missouri
Family Support Division

Print Summary

Login to this portal to get information about your personal or household benefits. Use by others, without your permission, is prohibited.

Food Stamps benefit Summary

Case Information:

Case Status	Household Member(s)	Certification Begin Date	Certification End Date
ACT	MARY E	09/01/2022	08/31/2024

Payments:

Benefit Month	Issue Date	Amount
01/2023	01/07/2023	\$ 163
12/2022	12/07/2022	\$ 196
11/2022	11/07/2022	\$ 196

Your ongoing benefit amount is \$163 /month