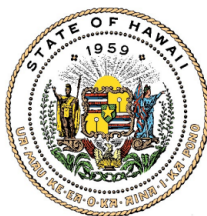


JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELawe KANAKA
Office of the Director
P. O. Box 339
Honolulu, Hawaii 96809-0339

TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

Dear WILLIAM AUSTIN,

This letter was generated from <https://pais-benefits.dhs.hawaii.gov> on Thu Apr 11 15:23:52 HST 2024. Please retain this letter as verification of your SNAP and/or Financial Benefits.

Letter ID: JYVC-S1UD-TWRV

Issued Benefits from Case Number: 00394376

Program	Month	Amount
Supplemental Nutrition Assistance	04/2024	\$ 309
Supplemental Nutrition Assistance	03/2024	\$ 309
Supplemental Nutrition Assistance	02/2024	\$ 309
Supplemental Nutrition Assistance	01/2024	\$ 309
Supplemental Nutrition Assistance	12/2023	\$ 309
Supplemental Nutrition Assistance	11/2023	\$ 309
Supplemental Nutrition Assistance	10/2023	\$ 309
Supplemental Nutrition Assistance	09/2023	\$ 318
Supplemental Nutrition Assistance	08/2023	\$ 318
Supplemental Nutrition Assistance	07/2023	\$ 342
Supplemental Nutrition Assistance	06/2023	\$ 342
Supplemental Nutrition Assistance	05/2023	\$ 342
Supplemental Nutrition Assistance	04/2023	\$ 342

*Benefit amounts are valid as of 04/11/2024