

Main Office*
251 E HACKETT RD
MODESTO, CA 95358-9800

COUNTY OF STANISLAUS

VERIFICATION OF BENEFITS

Date: 06/30/2023
Case Name: Yoshio Maeyama
Case Number: 7068611
Worker Name: Benefit Center W-Four
Worker ID: 50LS10W4NV
Worker Phone Number: (877) 652-0734

YOSHIO G MAEYAMA III
336 S 3RD AVE
OAKDALE, CA 95361-3951

Physical Address:
336 S 3RD AVE
OAKDALE, CA 95361-3951

Home Phone Number:

Monthly Benefits							
Month/Year	CalWORKs	GA/GR	CalFresh	RCA	MC	CMSP	Family Size
01/23			253		Y	N	1
02/23			253		Y	N	1
03/23			253		Y	N	1
04/23			253		Y	N	1
05/23			253		Y	N	1
06/23			253		Y	N	1

Current Household Details											
Name	DOB	Aid Code	In the Home	CalFresh	CW	GA /GR	OHC	Medi-Cal	CMSP	MC/CMSP SOC	
Yoshio G Maeyama III	12/13/1983	M1	Y	Y	N	N	N	Y	N	0.00	

Comments

