Attachment F

VERIFICATION SUMMARY/RECORDKEEPING

Date Selected:	Selection Method:
Response Due:	[] Error Prone [] Random
Second Notice Sent:	
Date Reduction/Termination Notice Sent: _	
SNAP/TANF/FDPIR Household Confirmed:	Income Household:
[] SNAP/TANF/FDPIR Office [] Direct Verification	Income/Frequency: \$ [] Wage Stubs [] Written Documents [] Collateral Contacts [] Agency Records [] Other:
Not Confirmed: [] Eligibility not confirmed	[] other:
Verification Result: Attach another sheet if	more space is needed.
[] No Change [] Reduced to Free	[] Free to Reduced [] Ineligible
Family members affected and date change is	s made:
	Name/Date
Name/Date Name,	/Date Name/Date
Reason for Change: [] High Income [] SNAP/TANF/FDPIR Eligibility Not Confirmed [] Refused to Cooperate [] Other [] N/A	
Comments:	

Signature of Verifying Official: ______ Date: _____