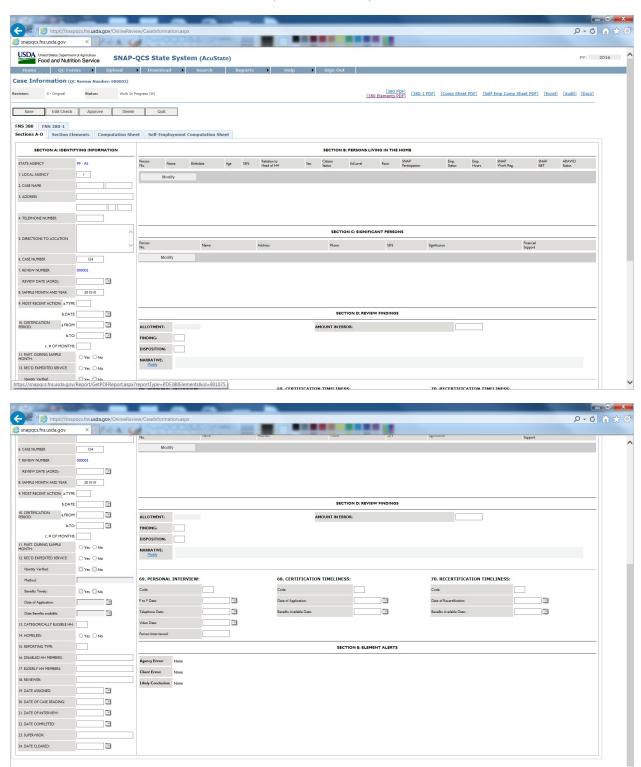
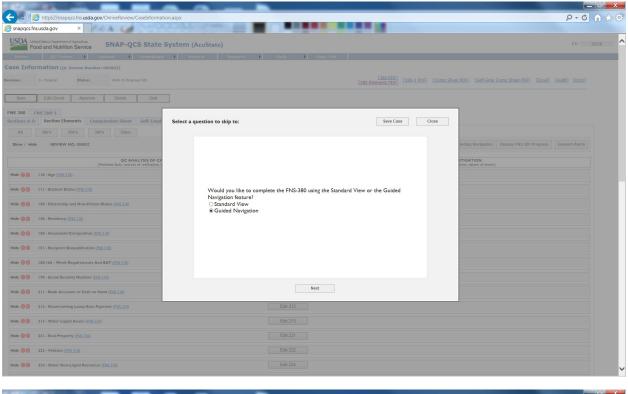
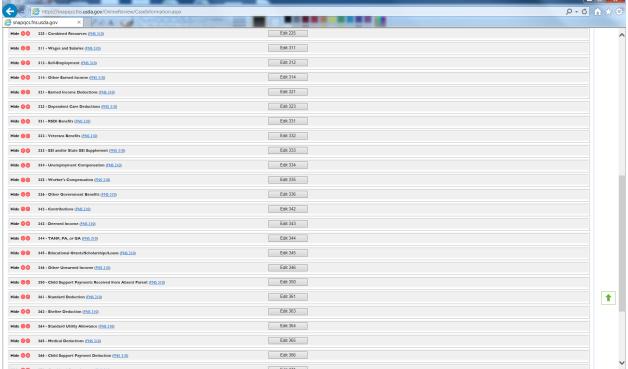
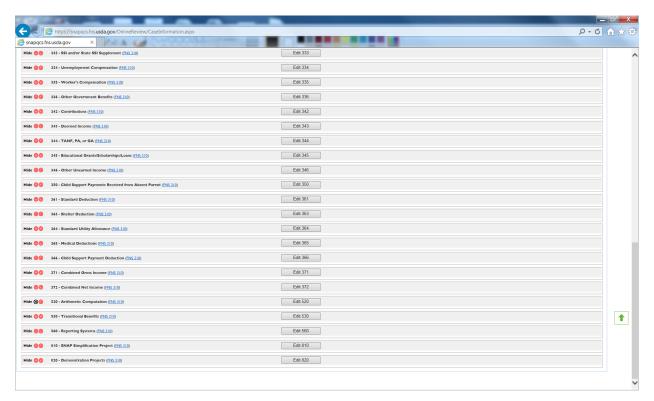
APPENDIX F

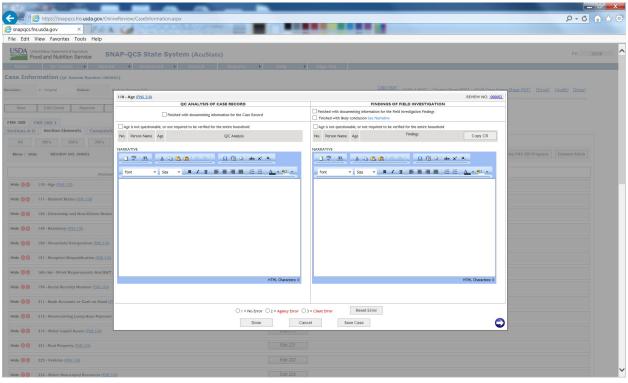
Screen Shots of SNAP Quality Control System - Automated FNS 380 (as of 5-25-2016)

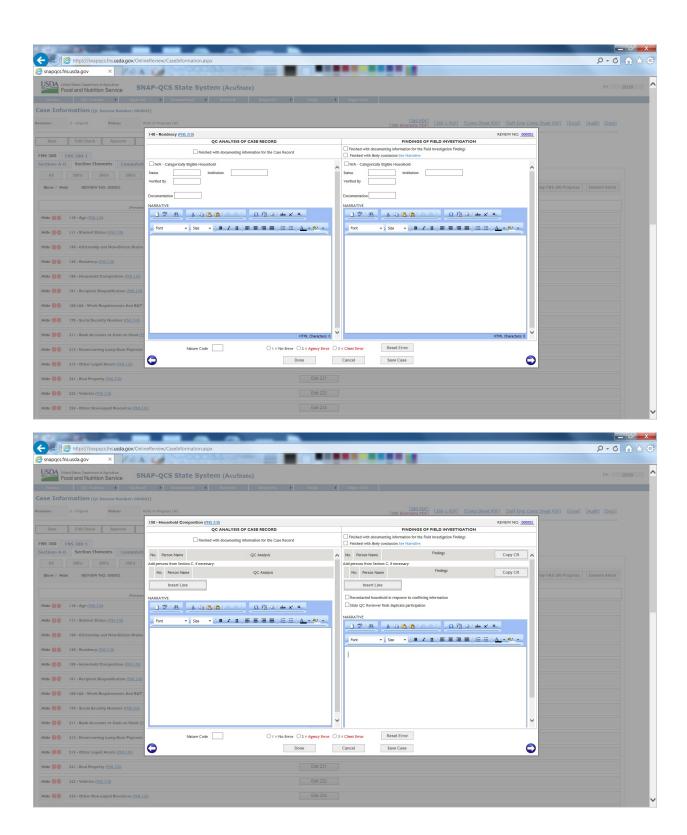


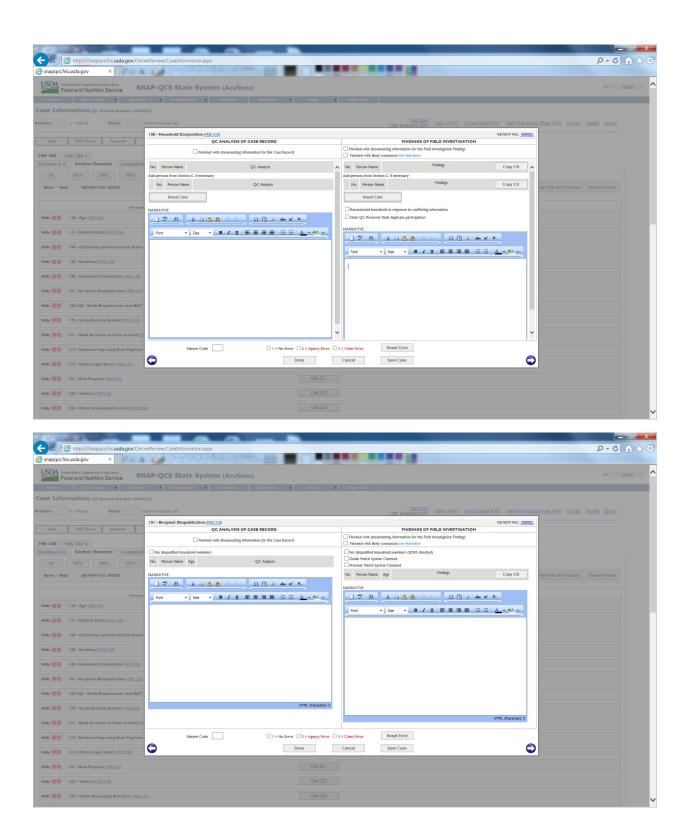


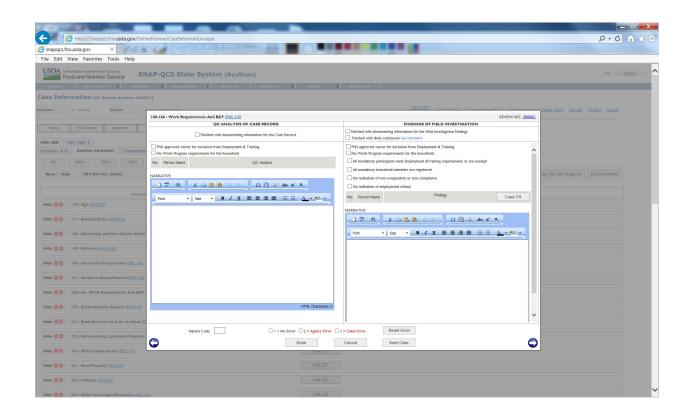


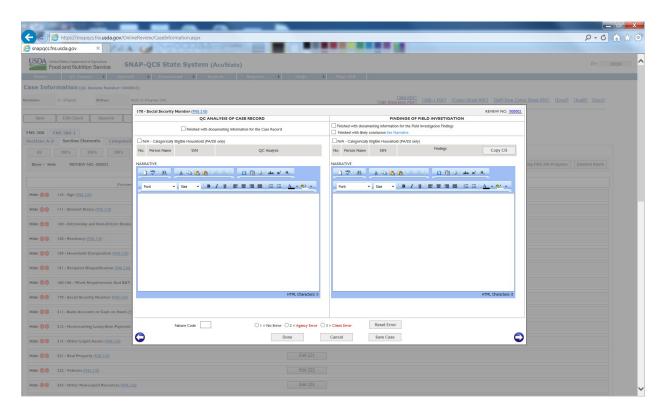


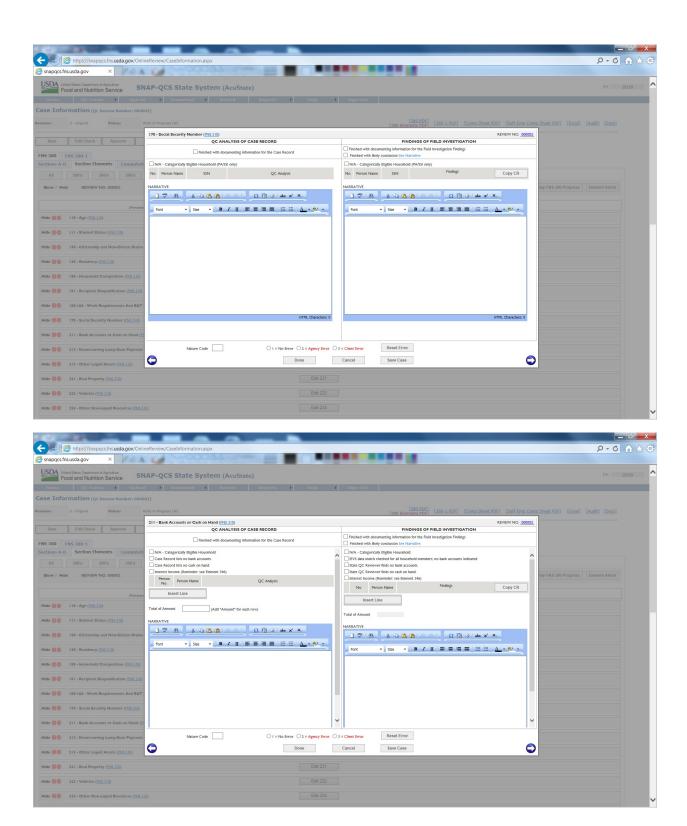


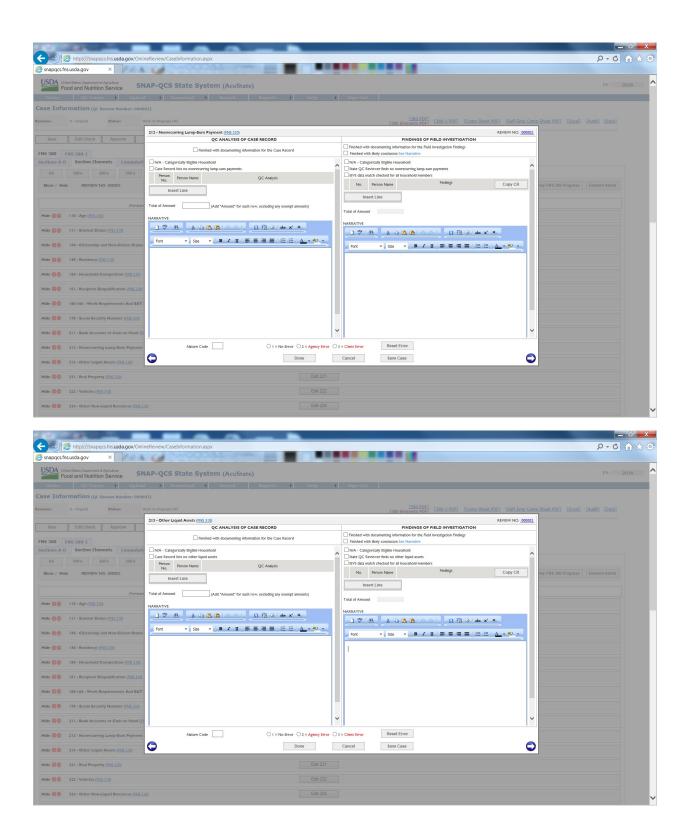


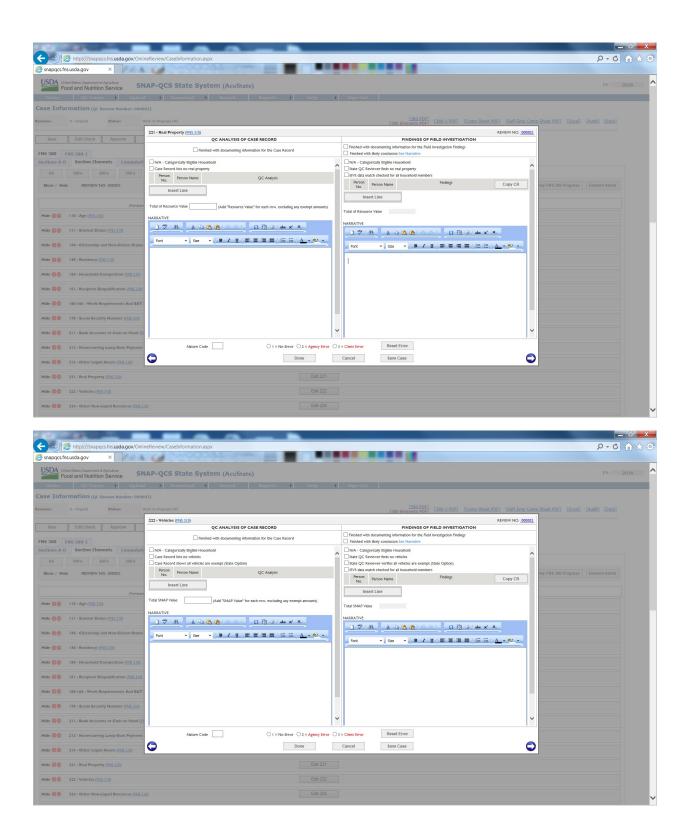


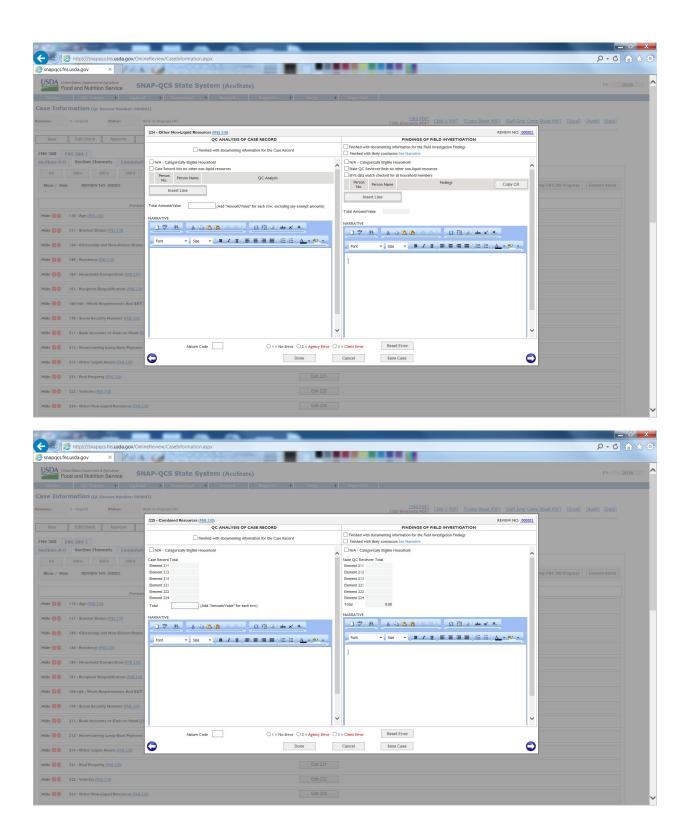


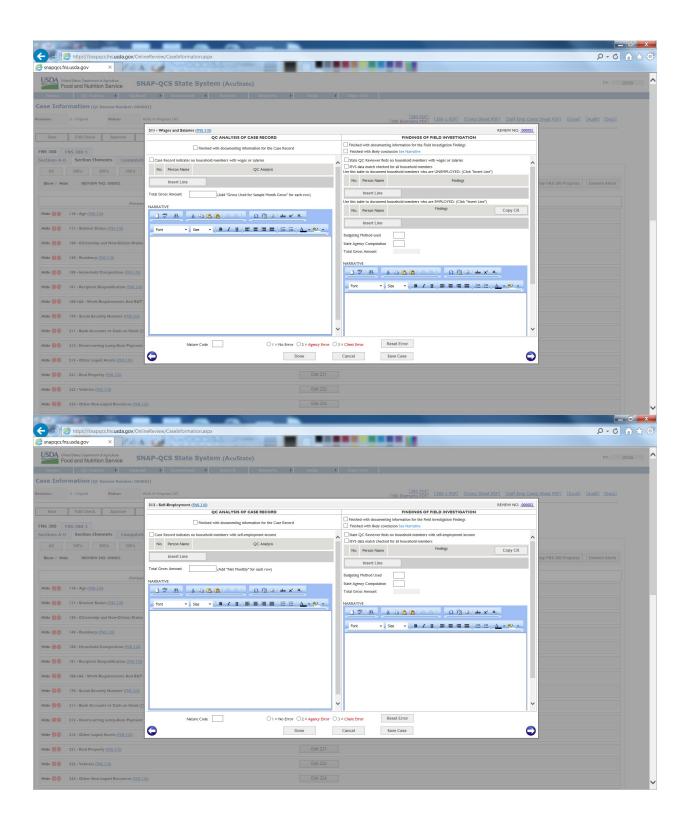


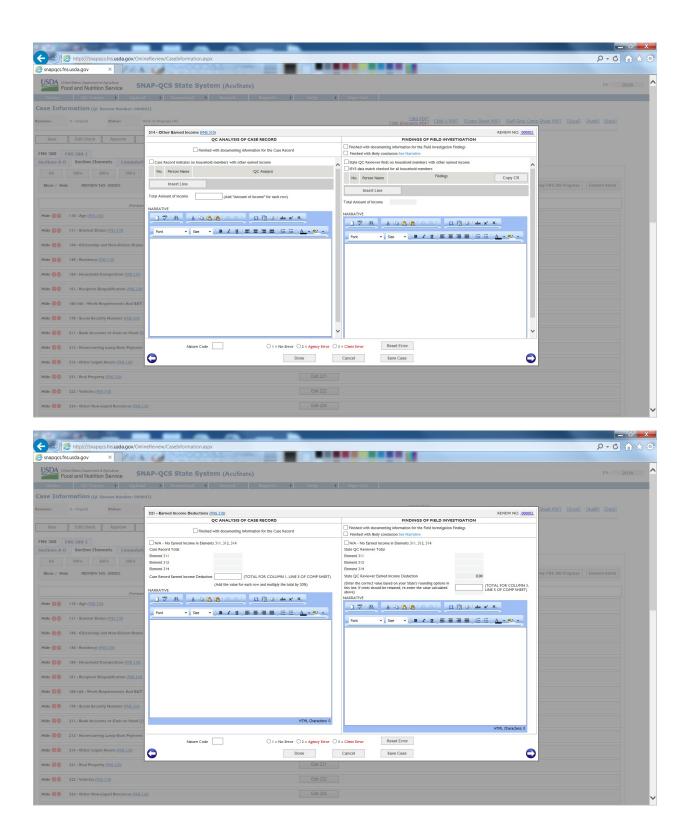


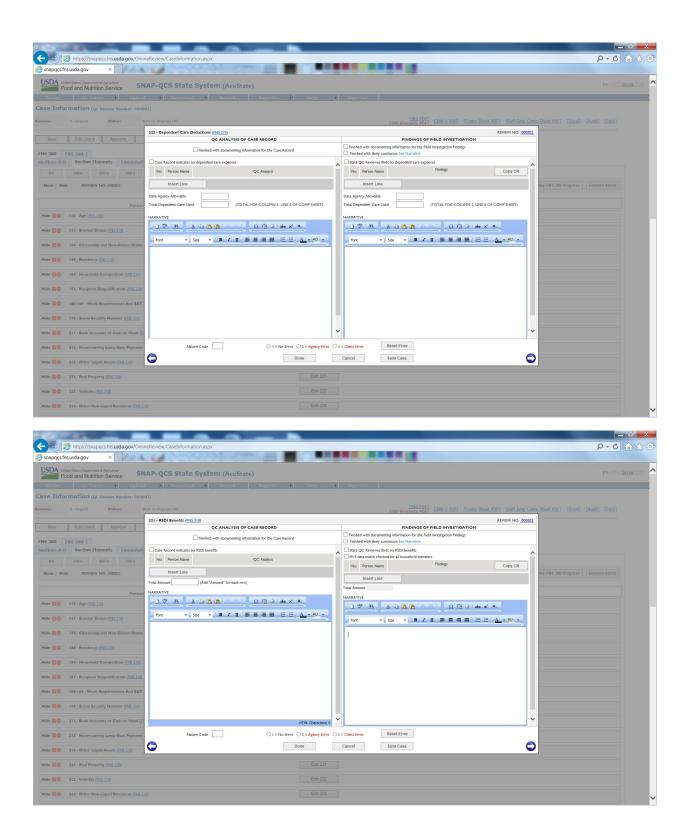


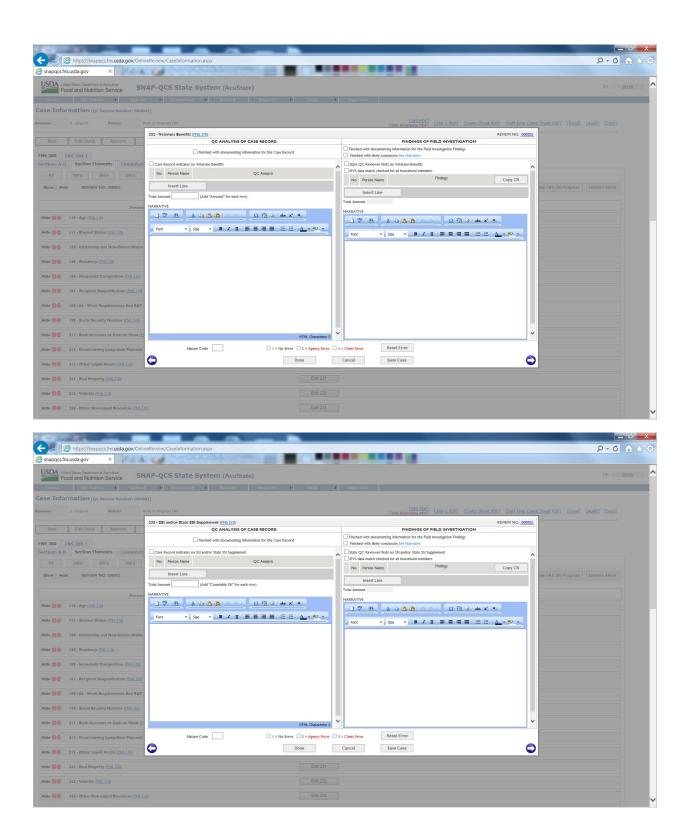


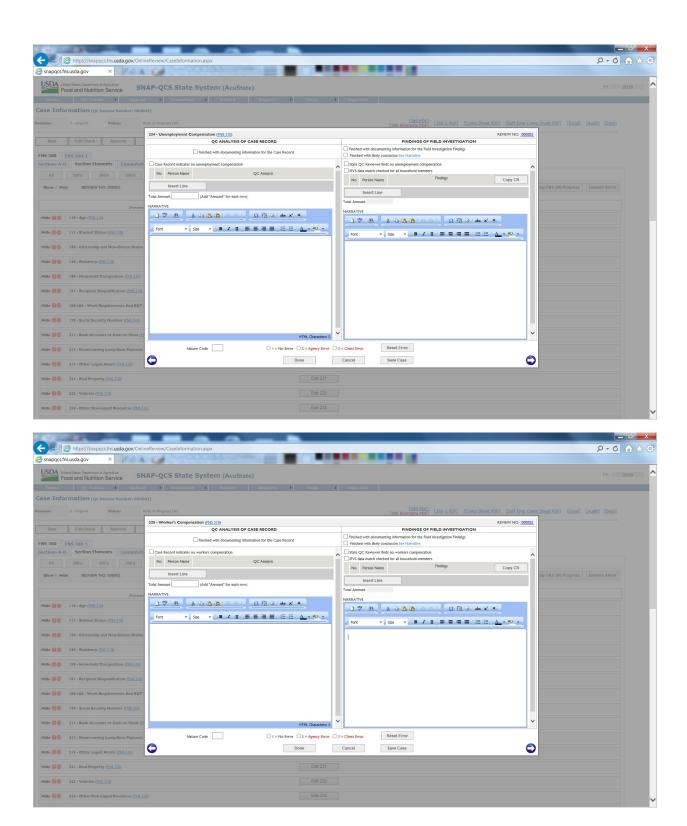


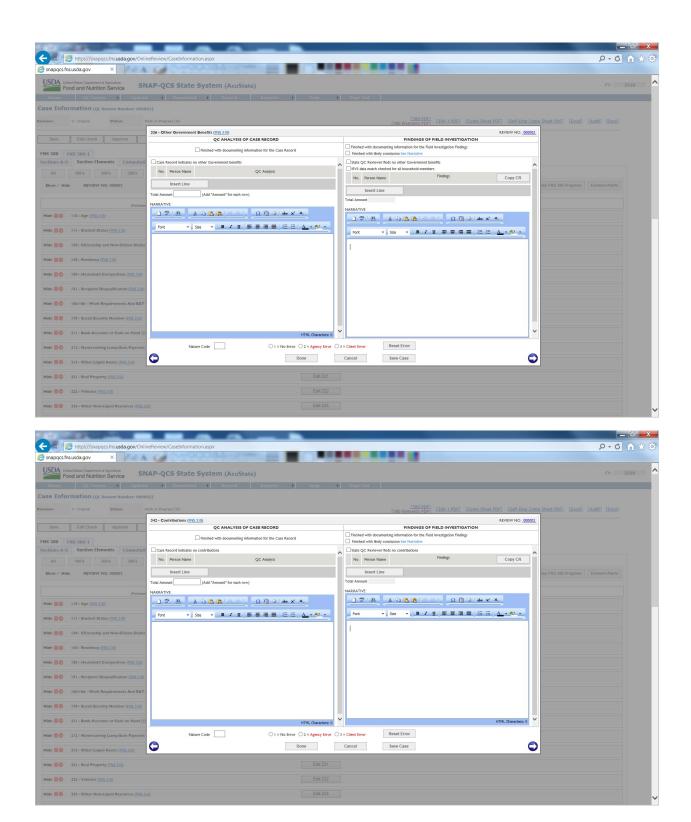


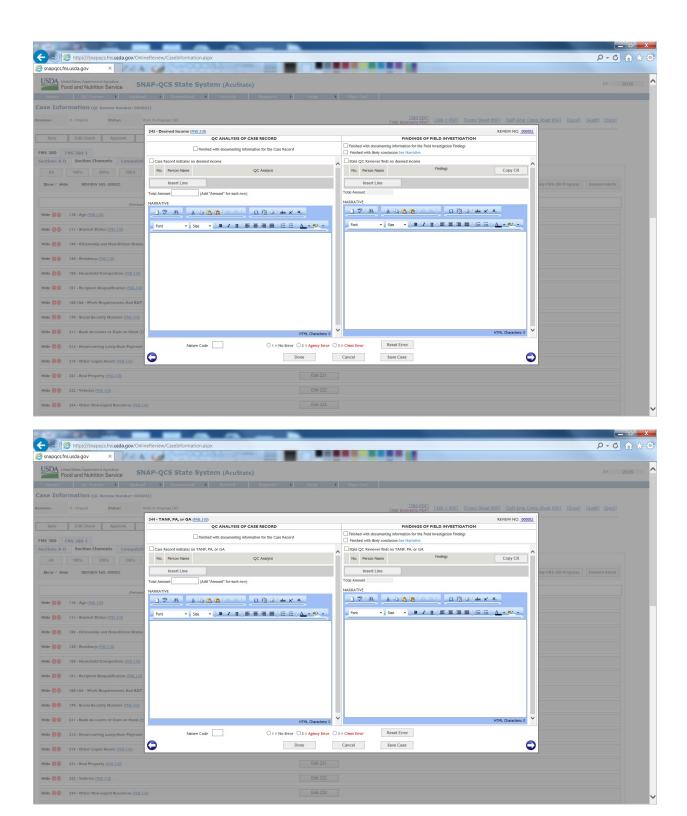


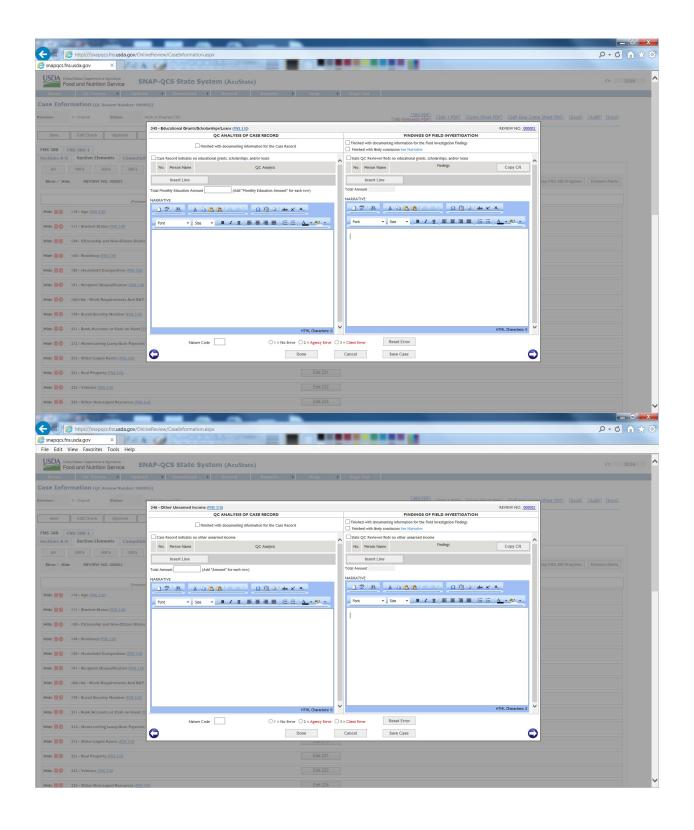


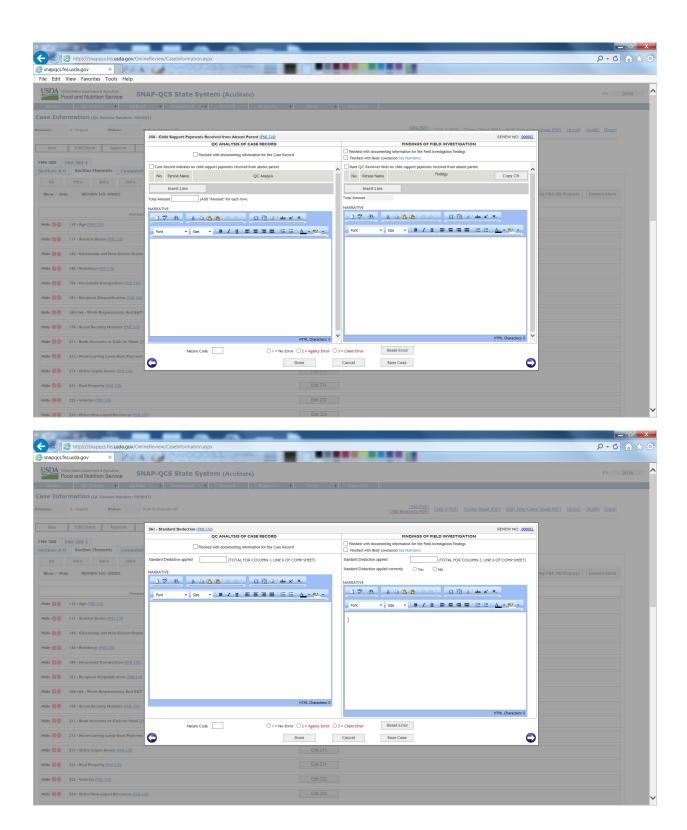


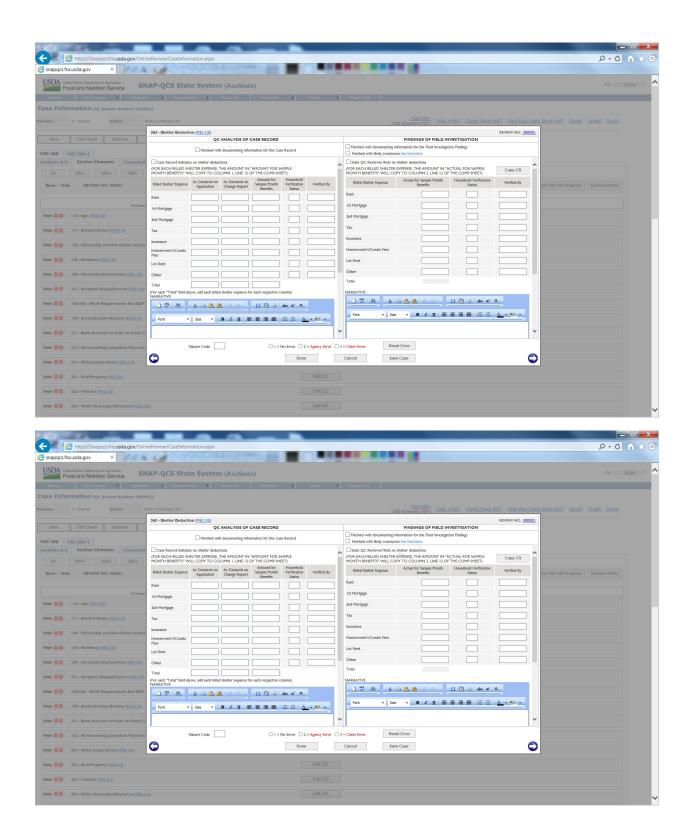


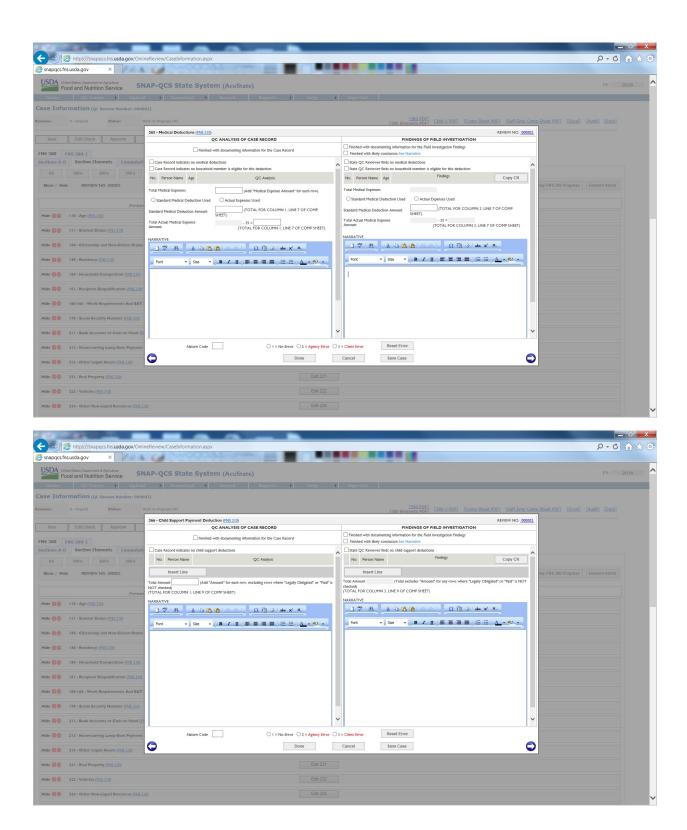


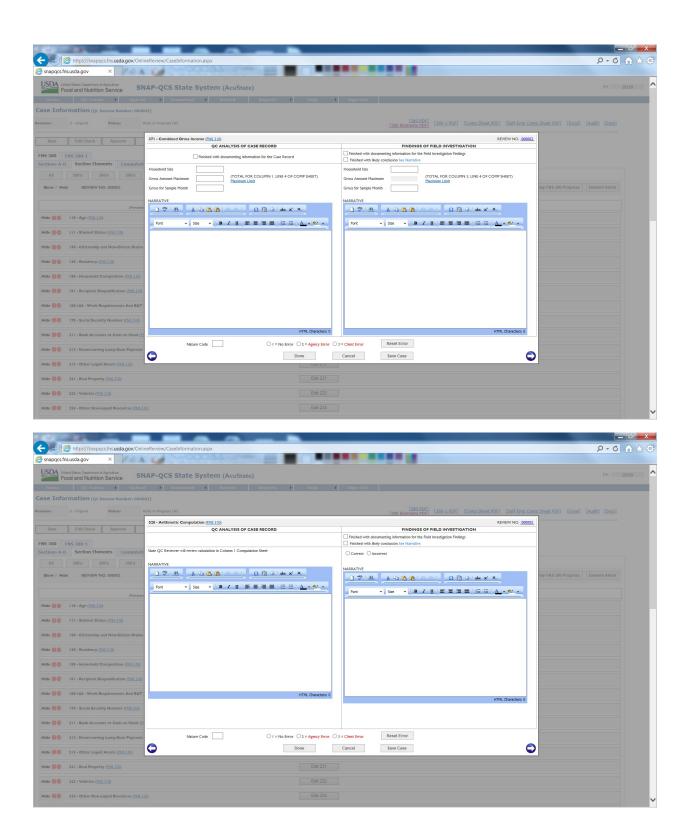


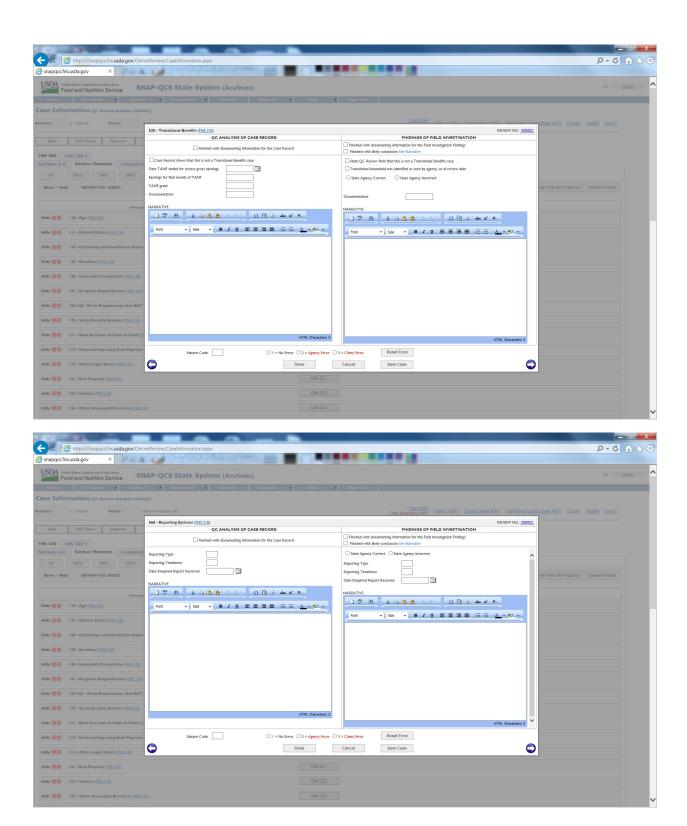


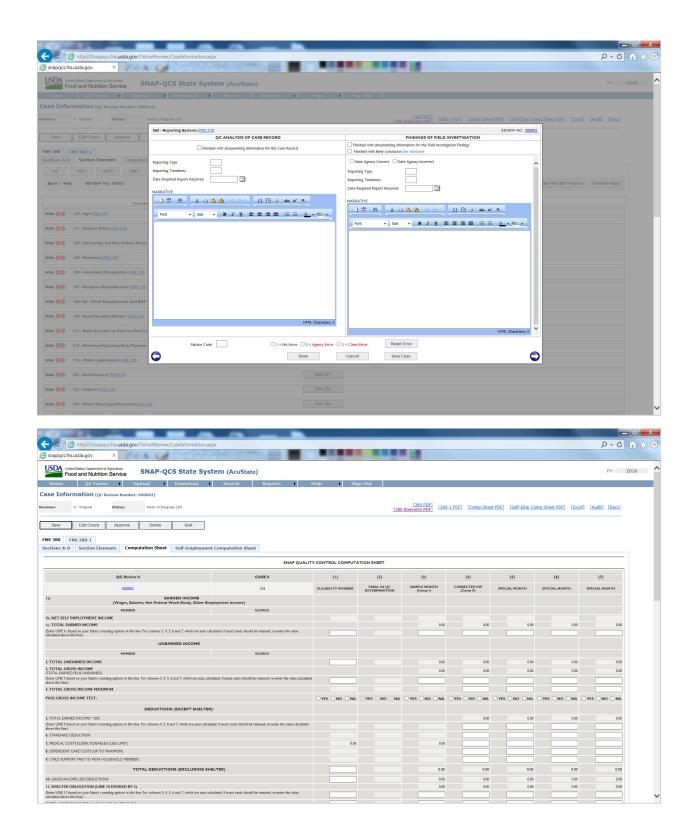












								- 1
https://snapqcs.fns.usda.gov/OnlineReview/CaseInformation.aspx							D - C	1
napqcs.fns.usda.gov ×								
TOTAL DEDUCTIONS (EXCLUDING SHELTER)			0.00	0.00	0.00	0.00	0.00	
I. GROSS INCOME LESS DEDUCTIONS			0.00	0.00	0.00	0.00	0.00	
. SHELTER OBLIGATION (LINE 10 DIVIDED BY 2)	<u> </u>		0.00	0.00	0.00	0.00	0.00	
ster LINE 11 based on your State's rounding options in this line. For columns 3, 4, 5, 6 and 7, which are auto calculated, if exact cents should be retained, re-enter the value culated above this line:)								
ITER HOMELESS SHELTER ALLOWANCE, IF APPLICABLE								
ADJUSTED GROSS INCOME AFTER DEDUCTIONS NE 10 MINUS HOMELESS SHELTER ALLOWANCE)			0.00	0.00	0.00	0.00	0.00	
SHELTER AND UTILITY COSTS:								
nt								
Mortgage								
d Mortgage								
×								
surance								
omeowner's/Condo Fees								
t Rent								
ther								
eating and/or cooling								
ctricity								
Fuel .								
ater								
wage								
arbage and trash collection								
A Received								
te basic service fee for one telephone (including tax on the basic fee)								
es charged by the provider for installing the utility								
TOTAL SHELTER COSTS			0.00	0.00	0.00	0.00	0.00	
EXCESS SHELTER (LINE 13 MINUS LINE 11)			0.00	0.00	0.00	0.00	0.00	
ster LINE 14 based on your State's rounding options in this line. For columns 3, 4, 5, 6 and 7, which are auto calculated, if exact cents should be retained, re-enter the value culated above this line:								
. ENTER THE MAXIMUM SHELTER LIMIT, NO ELDERLY/DISABLED MEMBER								
NET MONTHLY INCOME								
ENTER AMOUNT FROM UNE 10 COME AFTER DEDUCTIONS EXCEPT SHELTER)			0.00	0.00	0.00	0.00	0.00	
IF ELDERLY/DISABLED MEMBER, ENTER LINE 14. FOR ALL OTHER HOUSEHOLDS, ENTER AMOUNT FROM LINE 14 OR LINE 15, WHICHEVER IS LESS								
NET INCOME = SUBTRACT LINE 17 FROM LINE 16			0.00	0.00	0.00	0.00	0.00	
ENTER NET INCOME LIMIT								
ASS NET INCOME TEST:	○YES ○NO ○NA	OYES ONO ONA	○YES ○NO ○NA	○YES ○NO ○NA	OYES ONO ONA	$\bigcirc_{YES} \bigcirc_{NO} \bigcirc_{NA}$	○YES ○NO ○NA	
ALLOTMENT								

https://snapqcs.fns.usda.gov/OnlineReview/CaseInformation.aspx							0-0	l fir
napqcs.fns.usda.gov ×								
bage and trash collection								
Received								
basic service fee for one telephone (including tax on the basic fee)								
es charged by the provider for installing the utility								
TOTAL SHELTER COSTS			0.00	0.00		0.00	0.00	
EXCESS SHELTER (LINE 13 MINUS LINE 11) ter LINE 14 based on your State's rounding options in this line. For columns 3, 4, 5, 6 and 7, which are auto calculated, if exact cents should be retained, re-enter the value			0.00	0.00	0.00	0.00	0.00	
culated above this line:)								
ENTER THE MAXIMUM SHELTER LIMIT, NO ELDERLY/DISABLED MEMBER								
NET MONTHLY INCOME								
ENTER AMOUNT FROM UNE 10 OME AFTER DEDUCTIONS EXCEPT SHELTER)			0.00	0.00	0.00	0.00	0.00	
IF ELDERLY/DISABLED MEMBER, ENTER LINE 14. FOR ALL OTHER HOUSEHOLDS, ENTER AMOUNT FROM LINE 14 OR LINE 15, WHICHEVER IS LESS								
NET INCOME = SUBTRACT LINE 17 FROM LINE 16			0.00	0.00	0.00	0.00	0.00	
ENTER NET INCOME LIMIT								
SS NET INCOME TEST:	OYES ONO ONA	OYES ONO ONA	OYES ONO ONA	O YES ONO O NA	OYES ONO ONA	OYES ONO ONA	○YES ○NO ○NA	
ALLOTMENT								
ENTER THRIFTY FOOD PLAN FOR HOUSEHOLD SIZE								
MULTIPLY LINE 18 BY 30% AND ENTER THE RESULTS			0.00	0.00	0.00	0.00	0.00	
PIGLI INCLUDE: 0 of 300 AND ENTER REDUCES LET LINE 2 based on your State's rounding options in this line. For columns 3, 4, 5, 6 and 7, which are auto calculated, if exact cents should be retained, re-enter the value obtained above this line; Used above this line;					0.00		0.00	
ALLOTMENT = SUBTRACT LINE 21 FROM LINE 20								
ORATED ALLOTMENT, IF APPLICABLE								
Check this box to have the Prorated Allotment displayed as the Allotment in Section D of the FNS-380 Face Sheet								
FINAL ALLOTMENT FOR QC REVIEW								
	Clear Column		Copy to Column2	Copy to Column2	Copy to Column2	Copy to Column2	Copy to Column2	
				Clear Column	Clear Column	Clear Column	Clear Column	
	COMPARISON I							
NE 23: COLUMN 1 MINUS COLUMN 3								
IF DIFFERENCE IS LESS THAN \$39, THERE IS NO E	ERROR. IF DIFFERENCE IS GREAT	TER THAN \$38, CONTIN	IUE TO COMPARISON 2					
	COMPARISON 2							
NE 23: COLUMN I MINUS COLUMN 4								
NE 23: COLUMN I MINUS COLUMN 5								
NE 23: COLUMN MINUS COLUMN 6								
IE 23: COLUMN MINUS COLUMN 7								
IF DIFFERENCE IS LESS THAN \$39, THERE IS NO ERROR. IF DIFFERENCE IS GREATI	ER THAN \$38, THEN USE THE	LESSER OF COMPARISON	I I AND COMPARISON 2	FOR ERROR DETERMINA	TION.			
RRATIVE: Hodfy								
INVATIVE COST								

