

**Subsidization CR**  
Form Number: FNS-300 (PR) (10-13)  
Form Description: State Insurance and Participation Estimates  
Program: SNAP Nutrition  
State: PR  
Agency Code: 430332  
Agency Name: Puerto Rico Admin Servs Div of Family  
Program Year: October 2018  
Subsidization Type: Monthly  
Subsidization Method: Hourly Program  
Revisions: 0

**State Insurance and Participation Estimates**

	October 2018	September 2018	August 2018
<b>2. Insurance (Dollar)</b>			
Regular Operating Fund Benefit (20%)	13	13	13
Regular Operating Cost Benefit (20%)	13	13	13
Disaster	13	13	13
Disaster Supplement	13	13	13
Adjustment	13	13	13
<b>Total Insurance</b>	<b>65</b>	<b>65</b>	<b>65</b>
<b>3. Number of Participating People</b>			
Regular Operations	33	33	33
Disaster			
Disaster Supplement			
Adjustment			
<b>Total People</b>	<b>33</b>	<b>33</b>	<b>33</b>
<small>(1) Not available (see special instructions for March and September reporting of this item) (2) Not available (see special instructions for March and September reporting of this item)</small>			
<b>4. Number of Participating Households</b>			
Regular Operations			
Disaster			
Disaster Supplement			
Adjustment			
<b>Total Households</b>			
<small>(1) Not available (see special instructions for March and September reporting of this item) (2) Not available (see special instructions for March and September reporting of this item)</small>			
<b>5. Elderly - 20%</b>			
20% Insurance Total			
Number of People Receiving 20%			