

Iowa Department of Health and Human Services **Reporting SNAP Changes**

Keep this form so you know how and when to report changes. If you don't report on time, you will

	Date:
	Case #:
Vou have been approved for SNAD and will receive your Nation o	f Decision evalaining benefits in a
You have been approved for SNAP and will receive your Notice of separate mailing. This letter explains how and when to report chat SNAP benefits. This form is for SNAP only. Remember, if you recordays to report changes for those programs.	nges that happen while you receive
Important! If you have any of the changes listed below, you r next month after the change happens.	nust report them by the 10 th of the
 If anyone in your household receives lottery or gambling winning If your household's income goes over the gross income limit of 	
	f \$
 If your household's income goes over the gross income limit of Gross income is the amount before taxes and other deductions. 	f \$ tions are taken out.
 If your household's income goes over the gross income limit of Gross income is the amount before taxes and other deduction. Include income of all household members. 	f \$ tions are taken out. earnings \$

How to Report Changes

- Call: 1-877-347-5678 Monday Friday 7:00 a.m. to 6:00 p.m., excluding state holidays
- Email: IMCSC@dhs.state.ia.us

Quality Control

Quality Control is responsible for reviewing SNAP cases to ensure they are accurate. If your case is selected for review, you are required to cooperate by attending an interview and providing verification of your circumstances. If you do not cooperate, your SNAP benefits will be canceled. You will not be eligible for benefits again until you cooperate.