

Plan Approval/Denial Communication

| TraceID | CaseNo | Holder Name | Holder SSN | Plan Name | Plan Status | Plan Start Date | Plan End Date | BenefitAmount | DenialReason |
|---------|--------|-------------|------------|-----------|-------------|-----------------|---------------|---------------|--------------|
| 323 | 309 | | null | SNAP | Denied | null | null | null | High Income |