

FIRST LETTER

DTA - Bay State CAP
600 Washington Street
Boston, MA 02111

Important Notice - Read Carefully
Este Mensaje Es Importante - Lea Cuidadosamente

Massachusetts Department of Transitional Assistance

{RECIPIENT_NAME}
{RECIPIENT_ADDRESS}
{RECIPIENT_CITY/TOWN, STATE, ZIP}

6/24/2005

**WELCOME TO BAY STATE CAP
A New Way to Help You Pay for Food**

Dear {Recipient}:

The Social Security Administration (SSA), United States Department of Agriculture and Massachusetts Department of Transitional Assistance (DTA) worked together to bring you a new food assistance program called Bay State CAP. We are writing to tell you that based on SSA information you are automatically eligible for this new program.

Bay State CAP was designed to provide more money for food for elders and people with disabilities who receive Supplemental Security Income (SSI). Just like food stamps, you can use Bay State CAP food assistance benefits to buy food in supermarkets or pay for prepared meals at special meal programs.

If you choose to participate in Bay State CAP:

- ◆ You will get food assistance benefits for 36 months.
- ◆ Your food assistance benefits will be deposited in an account created just for you.
- ◆ You will use your Bay State Access Card and PIN like a credit or debit card when you go food shopping.

\$ { _____ } has already been deposited in an account for you.

- ◆ You will receive your Bay State Access Card in the mail in a day or two. Be sure to watch your mail for your Bay State Access Card.

SECOND LETTER

{BEACON_USER_STREET_ADDRESS} Important Notice - Read Carefully
{BEACON_USER_CITY, STATE, ZIP} Este Mensaje Es Importante - Lea Cuidadosamente

Massachusetts Department of Transitional Assistance

{RECIPIENT_NAME} {RECIPIENT_SSN}
{RECIPIENT_ADDRESS} {BEACON_USER_OFFICE_NAME}
{RECIPIENT_CITY/TOWN, STATE, ZIP}

8/XX/2005

BAY STATE CAP FOOD ASSISTANCE
A New Way to Help You Pay for Food

Dear {Recipient}:

Congratulations on accessing your Bay State CAP food assistance benefits. We are glad you took advantage of this new benefit program.

Your certification period for Bay State CAP benefits is from {FS_CYCLICAL_START_DATE} through {FS_CYCLICAL_END_DATE}.

Your monthly Bay State CAP benefit amount will be {FS_AMOUNT}.

You will get your Bay State CAP benefits on the {FS_BENEFIT_DAY} of each month.

You already received your monthly benefits for July and August 2005. The next Bay State CAP benefits you will receive will be for the period of {SEPTEMBER_CYCLICAL_PERIOD}.

Your monthly food assistance benefit amount is based on a standard shelter amount. If you pay \$450 or more per month for shelter (rent/mortgage), you may be eligible for higher Bay State CAP benefits. Complete and sign the enclosed Bay State CAP Shelter Statement if you pay more than \$450 per month for shelter costs.

If you pay less than \$450 per month for shelter, do nothing to continue getting your food assistance benefits.

Your Bay State CAP worker is {WORKER_NAME} at {USER_TELEPHONE_NUMBER}. Please call your worker if you have any questions about your case.



A117 You are entitled to {FS_TYPE} benefits, if eligible, without regard to age, race, color, sex, handicap, religious creed, national origin, or political beliefs. If you believe that the Department, in making your eligibility determination, has discriminated against you, contact your local Transitional Assistance Office to find out how you can file a complaint.

A125 To ask about free legal services, call: {LEGAL_SERVICE_INF}.

