



DFREQAE01000BXJF1



Proof Of Eligibility

State Form 53549 (R/1/6-08) FI 2430

Agency Information

Family and Social Services Administration Document Center

PO Box 1810
Marion, Indiana 46952

Telephone: 1-800-403-0864

Case Information

Full Name: BILLIE RUSSELL

Date of Birth: 01/27/1949

Case Number: 3000836399

Social Security Number: XXX-XX-2265

Home Address: 245 DO NOT TOUCH
VIGO, IN 47811

Mailing Address: CR 245 DO NOT TOUCH CASE
VIGO, IN 47811

Scheduled Appointment

Appointment Type: **Appointment Date:** **Scheduled Time:** **Office Location (In-OfficeOnly):**

Pending Applications

Programs Applied For:
Food Stamps, Health Coverage

Date Application Received:
01/27/2012

*FOR EXAMPLE
PURPOSES ONLY
NOT A REAL CASE.*

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