

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

106 CMR 364.000: SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM: DETERMINING HOUSEHOLD ELIGIBILITY AND BENEFIT LEVEL

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364.050: Introduction

When the Department receives a complete application, including all required verification and documentation, the case manager must determine if the household is eligible to participate in SNAP.

For eligible households, the benefit level is the monthly allotment or amount of SNAP benefits the household is eligible to receive.

364.100: Month of Application

The month of application is the month in which the household applies. Generally, the month of application will be the first month of the household's certification period.

364.110: Initial Applications

For most households submitting an initial application, eligibility will be based on the household's circumstances for the entire month of application.

(A) If the worker finds a household ineligible for the month of application, but eligible in the following month(s) because of anticipated changes, the same application shall be used to deny benefits for the month of application and to approve benefits for the following month(s). In this situation, the household does not have to reapply to receive benefits for the month(s) following the month of application. The worker will use the month of ineligibility, however, as the first month of the household's certification period.

(B) If the Department finds a household eligible for the month of application, but ineligible in the following month because of anticipated changes, the household shall be paid benefits for the month of application even if the benefit is not issued until the following month.

(C) If the Department finds that an eligible household's benefit amount for the month of the application is different from the household's benefit amount in the following month(s) because of anticipated changes, the Department shall issue the correct benefit amount for each of the certification months, even if the amount is different each month. The household may also elect to have its income averaged over the certification period.

364.120: Recertifications

Eligibility for recertifications shall be based on the household's circumstances anticipated for the certification period starting the month after the current certification period ends. If an application for recertification is submitted after the certification period ends, that application shall be considered an initial application and benefits for that month shall be prorated in accordance with 106 CMR 364.650.

If the household submits an application for recertification prior to the end of its certification period but is found ineligible for the first month following the end of the certification period, then the first month of any subsequent participation shall be considered the initial month of the new certification period. Conversely, if the household submits an application for recertification prior to the end of its certification period and is found eligible for the first month following the end of the certification period, then that month shall not be considered the initial month.

Any household that receives a Notice of Expiration at the time of or prior to recertification, as discussed in 106 CMR 366.310: *Notification to Recertify*, shall not be subject to proration for the first month of its new certification period if the deadline for filing an application for recertification falls after the end of their current certification period.

If a household is requested in writing to provide missing verifications by a specified date (at least ten calendar days after the request) that is beyond its current certification period, and provides the required verifications and is otherwise eligible, the household will not be subject to proration for the first month of its new certification period.

364.200: Determining Assets

If subject to the asset test, the household's assets at the time of the initial interview shall be used to determine the household's eligibility. (See 106 CMR 363.000 through 363.150).

364.300: Determining Income

All income received or anticipated to be received during the certification period must be considered when determining the household's eligibility and benefit level. The worker will determine the household's monthly countable income.

364.310: Income Anticipated in the Certification Period

To determine a household's eligibility and benefit level, the Department shall count the income already received by the household during the certification period and any anticipated income the household and the Department are reasonably certain will be received during the remainder of the certification period. If the amount of income or timing of the income receipt is uncertain, that portion of the household's income shall not be counted.

364.310: continued

For example, a household anticipating income from a new source, such as a new job or a recent application for public assistance benefits may be uncertain as to the timing and amount of the initial payment. The Department will not anticipate these monies as countable income unless there is reasonable certainty of the amount of the payment and the month the income will be received. If the exact amount of the income is not known, only that portion anticipated with reasonable certainty will be considered income. Where receipt of income is reasonably certain but the monthly amount may fluctuate, the household may choose to have their income averaged.

364.320: Anticipating Income

Income received during the previous four consecutive weeks shall be used as an indicator of anticipated income. If income fluctuates to the extent that a consecutive four week period alone cannot provide an accurate indication of anticipated income, the Department and the household may use a longer period of past time (*e.g.*, eight weeks) as an indicator of future income.

The Department shall not automatically attribute to the household the amounts of any past income, nor shall it use past income as an indicator of anticipated income when changes in income have occurred or can be anticipated during the certification period.

(A) Income from Steady Employment. The four consecutive weeks prior to initial certification or prior to the recertification date shall be used as an indication of anticipated income in the month of application and subsequent months, unless:

- (1) the household can verify that a change in income has occurred;
- (2) the Department and the household are reasonably certain that an income change will occur; or
- (3) some other method is used to determine income as provided in 106 CMR 364.320(B) and (C) and 364.340.

(B) Income from Hourly and Piecework Employment. When income is received on an hourly wage or piece work basis, weekly income may fluctuate if the wage earner works less than eight hours some days or is required to work overtime on others. In this case, the Department should consult with the household to determine the "normal" amount of income to be expected as a result of one week's work. This amount should be used to determine monthly income.

(C) Income from Seasonal Employment. In cases where the household's income is seasonal, the Department may use the income from the most recent earning season that is comparable to the certification period, rather than the four consecutive weeks prior to the application/recertification date as an indicator of anticipated income. The Department shall exercise particular caution in using income from a past season as an indicator of income for the certification period, as income may also fluctuate from one season to the same season in the following year.

364.330: Income Counted in the Month Received

Income anticipated during the certification period shall be counted as income only in the month it is expected to be received, unless the income is averaged. Nonrecurring lump sum payments are counted as an asset in the month received and not counted as income.

364.340: Income Averaging

In some cases income averaging is required. In other cases, the household may elect to average fluctuating income over the certification period. For destitute households as defined by 106 CMR 365.810(B), income shall not be averaged. Whenever a full month's income is anticipated but is received on a weekly or biweekly basis, the Department shall convert the income to a monthly amount by multiplying weekly amounts by 4.333 and biweekly amounts by 2.167.

364.340: continued

(A) Mandatory Income Averaging.

(1) Annual Income in Shorter Period. Households that earn their annual income in a period of time shorter than one year shall have their income averaged over a 12 month period, unless the income is received on an hourly or piecework basis. These households may include school employees, share croppers, farmers and other self-employed households, but not migrant or seasonal farm workers. For a detailed discussion of self-employed households, see 106 CMR 365.900: *Households with Income from Self-employment.*

(2) Educational Grants, etc. Households receiving scholarships, deferred education loans, or other educational grants shall have such income, after exclusions, averaged over the period for which they were provided. See 106 CMR 365.700 *Students* for a detailed discussion of student households.

(B) Optional Income Averaging. Households, except destitute households as defined by 106 CMR 365.810(B): *Destitute (Migrant) Household*, may choose to have their income averaged over the certification period. The number of months used to arrive at the average monthly income need not be the same as the number of months in the certification period. For example, if fluctuating income over the previous three months is known and it is reasonably certain that this income is representative of the fluctuations anticipated in the coming months, the income from the three known months may be averaged over a certification period of longer than three months.

(C) Assistance Payments. Households receiving state or federal assistance payments, such as TAFDC, EAEDC, SSI, or Social Security payments, on a recurring, monthly basis shall not have their monthly average income from these sources fluctuate merely because mailing cycles may cause two payments to be received in one month and none in the next month.

(D) Withheld Wages. Wages held at the request of the employee shall be considered income to the household in the month the wages would otherwise have been paid to the employee. However, wages held by the employer as a general practice, even if in violation of law, shall not be counted as income to the household, unless the household anticipates that it will ask for and receive an advance, or the household anticipates that it will receive income from previously held wages not previously counted as income by the Department. When reasonably anticipated, advances on wages shall count as income in the month received.

364.350: Determining Income for Special Situation Households

Determining income for PA households, categorically eligible households, student households, striker households, households with income from self-employment and other households with special circumstances is discussed in 106 CMR 365.000: *Supplemental Nutrition Assistance Program: Special Situation Households.*

364.360 Child Support Income Counted in the Month after Receipt

Households with a TAFDC household member that receives a child support payment of up to \$50 monthly as a TAFDC Related Benefit from the DOR Child Support Enforcement Division as provided in 106 CMR 705.900: *Maximum \$50 Support Payment*, shall have the payment used in the calculation of benefits for the month after receipt.

364.370: Determining Eligibility Based on Gross Income

Households must meet the applicable gross income standard, except for households containing elderly or disabled members meeting the requirements of 106 CMR 361.210: *Elderly or Disabled Individuals* or public assistance categorically eligible households, in accordance with 106 CMR 365.180: *Categorically Eligible Assistance Units*. SNAP-only TANF Services categorically eligible households must meet the gross income standard at 106 CMR 364.976. Non categorically-eligible households must meet the gross income standard at 106 CMR 364.950.

The household's gross income minus the exclusions listed in 106 CMR 363.230: *Excluded Income* must be compared to the appropriate maximum gross monthly income standard for the household size in accordance with 106 CMR 364.950 and 364.976. If this countable gross income is greater than the standard, the household is ineligible. If the countable gross income is equal to or less than the standard, the household's net income eligibility must be determined in accordance with 106 CMR 364.550.

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Net income in accordance with 106 CMR 364.550 is the sole basis of eligibility for households with an elderly or disabled member who meet the above requirement and are not categorically eligible as provided in 106 CMR 365.180: *Categorically Eligible Assistance Units*.

364.400: Determining Deductions

There are seven deductions from income. No other deductions are allowed.

(A) Standard Deduction. The standard deduction varies according to household size. No household receives more than the standard deduction for a household size of six. The standard deductions are posted at www.mass.gov/dta. Paper copies are available upon request.

(B) Earned Income Deduction. 20% of gross monthly earned income is allowed as a deduction. No additional deductions from earned income shall be made. Excluded earned income and any portion of income earned under a wage supplementation or support program attributable to public assistance shall not be allowed as a deduction.

This deduction shall not be allowed in determining an overissuance if the household fails to report earned income in a timely manner.

(C) Excess Medical Deduction. A household that includes an elderly or disabled individual, as defined in 106 CMR 361.210: *Elderly or Disabled Individuals*, is allowed a medical deduction when the elderly or disabled individual incurs monthly unreimbursed medical expenses above \$35 a month. No other household members are eligible for this deduction, unless they are also elderly or disabled. Special diets are not an allowable medical expense. The amount of the allowable deduction is based on the amount verified, in accordance with 106 CMR 364.450(A). The following deductions are allowed:

Medical Expense Verified	Amount of Deduction
\$35/month or under	\$0
Over \$35.00 to \$190/month	\$155
Medical Expense Verified	Amount of Deduction
Over \$190/month	Actual amount over \$35

Allowable medical expenses include:

- (1) Medical and dental care, including psychotherapy and rehabilitation services provided by a licensed practitioner or other qualified health professional;
- (2) Hospitalization (inpatient or outpatient) or nursing home care in a State-recognized facility and nursing care. Payments made by the household for someone who was a SNAP household member immediately before entering a hospital or nursing home are an allowable deduction under 106 CMR 364.400(C);
- (3) Over-the-counter medical medication, including insulin, when approved by a licensed practitioner or other qualified health professional; and the cost of medical supplies, sickroom equipment (including rental) or other prescribed equipment;
- (4) The cost of prescription drugs prescribed by a licensed practitioner, including the cost of postage and delivery for mail order medications and/or medical supplies;
- (5) Health and hospitalization insurance policy premiums. The premiums for health and accident policies payable in lump sum settlements for death or dismemberment and the premiums for income maintenance policies such as those that continue mortgage and loan payments while the beneficiary is disabled are not deductible;
- (6) Medicare premiums and co-payments;
- (7) Any cost-sharing or spend-down expenses incurred by MassHealth recipients;
- (8) Dental services, dentures, dental adhesives, hearing aids and batteries, and prosthetics;
- (9) Securing and maintaining a Seeing Eye dog, hearing dog or service animal, including the cost of food and veterinarian bills;
- (10) Eye glasses, contact lenses, lens supplies and other vision aids or treatments prescribed by a physician skilled in eye disease or by an optometrist;

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(11) Reasonable cost of public or private transportation and lodging to obtain medical treatment, medications, medical supplies or services. The allowable rate for transportation shall be the federal mileage reimbursement rate; and

(12) Maintaining an attendant, homemaker, home health aide, housekeeper or child care services which are necessary due to age, infirmity, or illness. When these services can qualify as either a medical or a dependent care deduction, the expense is treated as a medical deduction. In addition to the actual expense of these services, an amount equal to a one-person SNAP benefit allotment shall be deducted if the household furnishes a majority of meals to the individual providing the service. The allotment for this meal-related deduction is that in effect at the time the household is given the deduction. If the allotment amount changes during a certification period, the total deduction amount must be updated to reflect the new allotment amount no later than the household's next scheduled recertification.

(D) Dependent Care Deduction. The actual costs of the care of a child or other dependent necessary for a household member to accept or continue employment, comply with the SNAP Employment & Training Program requirements found at 106 CMR 362.310: *SNAP Employment and Training Program*, or to attend training or education preparatory to employment are deductible.

(E) Child Support Deduction. Legally obligated child support payments paid by a household member to or for a non-household member, which are verified in accordance with 106 CMR 361.610(J): *Legal Obligation and Actual Child Support Payments*, are allowed as a deduction. Households that fail or refuse to obtain necessary verification of their legal obligation or of their child support payments shall have their eligibility and benefit level determined without consideration of this deduction.

Legally obligated child support payments paid by a household member to a third party (e.g., a landlord or utility company) on behalf of the non-household member in accordance with the support order shall be included as part of the child support deduction. Payments that are made by the household to obtain health insurance for their children shall also be included as part of the child support deduction.

The Department shall allow a deduction for amounts paid toward arrearages, even for households without a payment history.

Alimony payments made to or for a non-household member shall not be included in the child support deduction.

(F) Homeless Shelter/Utility Deduction.

(1) Households in which all members are homeless and reside in a homeless facility, as defined by 106 CMR 360.030: *Definitions*, that incur or reasonably expect to incur any shelter and/or utility expenses during a month shall be eligible for the \$143 per month homeless shelter/utility deduction.

Households in which all members are homeless and reside in the home of another that incur or reasonably expect to incur any shelter and/or utility expenses during a month shall also be eligible for the \$143 deduction. Households that receive this deduction are not entitled to either the shelter deduction provided at 106 CMR 364.400(G) or the Standard Utility Allowance provided at 106 CMR 364.400(G)(2) since the homeless shelter/utility deduction already includes both shelter and utility costs.

(2) Households in which all members are homeless and reside in the home of another in accordance with 106 CMR 360.030: *Definitions* that verify shelter and/or utility expenses greater than \$143 per month shall be eligible for both the shelter deduction and the applicable Standard Utility Allowance.

(G) Shelter Deduction. A deduction is allowed for monthly shelter expenses and utility costs in excess of 50% of the household's income after all the above deductions have been allowed. This shelter deduction amount is posted at www.mass.gov/dta. Paper copies are available upon request. This limit on the shelter deduction amount does not apply if the household contains a member who is elderly or disabled in accordance with 106 CMR 361.210: *Elderly or Disabled Individuals*.

(1) Shelter Expenses.

(a) Continuing charges for the shelter occupied by the household, including rent and mortgage payments, or other continuing charges leading to the ownership of shelter, such as loan repayments for the purchase of a mobile home, including interest on such payments, or condominium fees;

364.400: continued

- (b) Property taxes, state and local assessments, and insurance on the structure itself, but not the separate expense of insuring furniture or personal belongings;
- (c) Shelter expenses as described in 106 CMR 364.400(G)(1)(a) and (b) for a home not actually occupied by the household because of employment or training away from home, illness, or abandonment of the home due to natural disaster or casualty loss.

Shelter expenses for a vacated home shall be included in the shelter deduction if the household intends to return to the home, the current occupants of the home, if any, are not claiming a shelter deduction for SNAP purposes, and the home is not leased or rented during the absence of the household;

- (d) One-time deposits shall not be included as shelter costs; and
- (e) Charges for repair of a home substantially damaged in a natural disaster such as a fire or flood are allowed as a shelter deduction unless the repair charge has been, or will be reimbursed by private or public relief agencies, insurance companies or any other source.

(2) Utility Costs. A household that incurs utility costs separately and apart from its rent or mortgage is eligible for a utility allowance. A standard utility allowance (SUA) will be used in calculating the Shelter Deduction for the household, even in the event that actual expenses exceed the mandated amount. The applicable SUA will be determined based on the type of utility costs incurred by the household. There are three SUAs. The SUA amounts are listed at 106 CMR 364.945.

Only one of the following SUAs applies to any household based on the type of utility costs incurred by the household as described in 106 CMR 364.400(G)(2)(a) through (c):

- (a) Heating/Cooling Standard Utility Allowance. The heating/cooling standard utility allowance applies to a household that incurs heating or cooling costs separate and apart from its rent or mortgage and that is billed for heating or cooling costs on a regular basis. The Heating/Cooling SUA includes the following expenses: heating; cooling; cooking fuel; electricity; water; sewerage; garbage and trash collection; the basic fee for one telephone and tax; and the initial utility installation fee.

A household living in a public housing unit that has central meters and that charges the household for excess heating or cooling costs shall be permitted to use this allowance.

A household that incurs electricity costs to power an electric blower that distributes heat or cooling from an oil or gas furnace shall not be permitted to use this allowance.

Recipients of energy assistance payments made under the LIHEAA of 1981 are entitled to use the heating/cooling SUA because they are deemed to have incurred out-of-pocket energy expenses.

A household that receives indirect energy assistance payments, made under a program other than LIHEAA, but continues to incur out-of-pocket heating expenses during any month covered by the certification period, is still eligible to use the heating standard utility allowance. A household that receives energy assistance payments (other than LIHEAA) shall have its energy assistance payments prorated over the entire heating season that the payments are intended to cover to determine whether the household incurs any out-of-pocket heating expenses;

- (b) Nonheating Standard Utility Allowance. The Nonheating Standard Utility Allowance applies to a household that does not qualify for the the Heating/Cooling SUA because it incurs no heating or cooling costs separate from its rent or mortgage. The Nonheating SUA includes the following expenses: cooking fuel; electricity; water; sewerage; garbage and trash collection; the basic fee for one telephone and tax; and the initial utility installation fee, if applicable; or

- (c) Telephone Standard Utility Allowance. The Telephone Standard Utility Allowance applies to a household that incurs a telephone cost but none of the following costs separate from its rent or mortgage: heating or cooling; cooking fuel; electricity; water; sewerage; and garbage and trash collection. The telephone SUA includes the basic fee for one telephone and tax, and the initial utility installation fee, if applicable.

(3) Treatment of the Standard Utility Allowance in Shared Living Situations. If a household lives with another SNAP household or households, each household that contributes to utility costs shall be entitled to the full applicable SUA.

(4) Standard Utility Allowance for Unoccupied Homes. Households that also incur utility expenses for a home that is unoccupied because of employment or training away from home, illness or abandonment caused by a natural disaster or casualty loss, will only be allowed one standard utility allowance, whichever is highest.

364.410: Determining Deductible Expenses

The Department will determine which claimed expenses are deductible and their amounts.

(A) Limitations on Deductible Expenses. The allowable expenses for medical care, dependent care, shelter and child support are provided in 106 CMR 364.400. Education expenses and the cost of doing business for the self-employed are income exclusions and handled in accordance with 106 CMR 363.230(D): *Student Households* and (J): *Self-employed Households*.

(B) Types of Nondeductible Expenses.

(1) No claimed expense is an allowable deduction unless the household makes a money payment for the service and the service is provided by someone outside the SNAP household.

(2) Any expense covered by a reimbursement or vendor payment which is excluded from income, except energy assistance vendor payments made under the Low Income Home Energy Assistance Act (LIHEAA), is not an allowable deduction. For example, if a household pays no rent because an excluded vendor payment is made to the landlord on behalf of the household, the rent expense is not an allowable shelter deduction. A utility expense which is reimbursed or paid by an excluded payment, including utility reimbursement from the Department of Housing and Urban Development and the Farmers Home Administration, shall not be deductible.

(3) A medical expense or that portion of a medical expense that is reimbursed is not an allowable medical deduction. For example, if a third-party insurer such as Medicare reimburses a recipient for 80% of the billed expense, only the nonreimbursable 20% of the expense is deductible. If the household reports an allowable medical expense at the time of certification but cannot provide verification, and if the amount of the expense cannot be reasonably anticipated based on available information about the recipient's medical condition and public or private insurance coverage, the household shall only have the non-reimbursable portion of the medical expense considered when the amount of the expense or portion is verified.

(C) Households With Disqualified Nonhousehold Members. Deductible expenses of households with disqualified nonhousehold members shall be determined in accordance with 106 CMR 365.500: *Households Living with Non-household Members*.

(D) Budgeting Child Support Payments. Child support payments shall be budgeted prospectively in the following manner.

For households with a history of three or more months of paying child support, average at least three months' payments (including arrearages), taking into account any change in the legal obligation, and use this average as the household's support deduction.

For households with either no or less than a three-month child support payment history, estimate the anticipated payments (excluding arrearages) and use this estimate as the household's support deduction.

364.420: Anticipating Expenses

The case manager must make a reasonable prediction of the amount the household expects to be billed during the certification period for allowable medical, dependent care, and shelter expenses. Anticipation of these expenses is based on the most recent month's bills unless the household is reasonably certain a change will occur.

At certification, the household shall report and verify all medical expenses. The household's monthly medical deduction for the certification period shall be based on information reported and verified by the household, and any anticipated changes in the household's medical expenses that can be reasonably expected to occur during the certification period based on available information about the client's medical condition, public or private medical insurance coverage and current verified medical expenses. The household shall not be required to report its medical expenses during the certification period. If the household voluntarily reports a change in medical expenses, the Department shall verify the change in accordance with 106 CMR 366.100: *Changes During the Certification Period* if the change would increase the household's allotment. Verification of the change in medical expenses is required before the Department acts on the change. In the case of a reported change that would decrease the household's allotment, or make the household ineligible, the Department shall act on the change without requiring verification, though verification which is required by 106 CMR 366.100 shall be obtained prior to the household's recertification.

364.430: Expenses Deducted in the Month Due

Except for expenses the household elects to average, the expense is deducted in the month it is billed or otherwise becomes due, regardless of when the household intends to pay the expense. For example, rent which is due each month is included in the household's monthly shelter deduction even if the household does not pay the rent each month.

A particular expense may be deducted only once. Amounts carried forward from past billing periods are not deductible in a subsequent month even if included in the most recent billing or actually paid by the household in the most recent billing period.

364.440: Averaging Expenses

A household may elect to average fluctuating or one-time deductible expenses instead of taking a deduction in the month the expense is billed or otherwise becomes due.

(A) One-time-only expenses, other than medical expenses, are averaged over the entire certification period in which they are billed regardless of when the expense is reported by the household.

(B) Expenses billed less often than monthly are averaged forward over the interval between scheduled billings. If there is no scheduled interval between billings, the expense is averaged forward over the period the expense is intended to cover. For example, if a household receives a single bill in June for dependent care expenses for a three-month period, the household may elect to average the deductible amount over the months of June, July and August instead of taking a one-time deduction.

(C) For households certified less than 24 months, one-time-only medical expenses which are reported during a certification period may be taken as a one-time deduction or averaged forward over the remaining months of the certification period. If the household elects to average the expense, the averaging begins the month the change becomes effective.

(D) Households certified for 24 months that have one-time-only medical expenses may:

- (1) if the expense is incurred during the first 12 months, opt to:
 - (a) deduct the expense for one month;
 - (b) average the expense over the remainder of the first 12 months; or
 - (c) average the expense over the remaining months in the certification period.
- (2) if the expense is incurred after the 12th month of the certification period, opt to:
 - (a) deduct the expense for one month; or
 - (b) average the expense over the remaining months in the certification period.

(E) Expenses billed more often than monthly must be converted to a monthly amount. To convert these expenses to a monthly amount the worker must multiply weekly amounts by 4.333 and biweekly amounts by 2.167.

364.450: Verification of Deductible Expenses at Initial Certification

(A) Medical Expenses. The amount of allowable medical expenses, including the amount of reimbursement (for example, by a third-party insurer), must be verified before the initial certification, if use of the expenses would result in a deduction. Additional verifications relevant to the claimed medical expenses, such as whether the services provided are allowable, are not required unless the information provided by the applicant or recipient is questionable pursuant to 106 CMR 361.620: *Questionable Information*.

(B) Other Expenses. Other deductible expenses must be verified before initial certification only when questionable and use of the expense claimed by the household would actually result in a deduction.

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If a deductible expense must be verified, but obtaining the verification would delay the household's certification, the worker must inform the household that it may elect to be certified without receiving the deduction for the unverified expense. If the household subsequently provides the missing verification, the case manager shall treat the information as a reported change and provide increased benefits, if any, in accordance with the timeliness standards for reported changes. The household is not entitled to lost benefits unless the expense could not be verified within the 30-day application processing standard because the worker did not allow the household at least ten days from the date of the initial request to provide the verification or because the worker did not provide the household assistance when required. Households ineligible because a claimed, but unverified expense, is disallowed must be sent a Notice of Pending/Denial on the 30th day following the date of application.

364.500: Determining Net Income

The net monthly income of destitute (migrant) households is calculated in accordance with the provisions of 106 CMR 365.810: *Expedited Service Households*.

The following steps lead to the determination of net monthly income for all other households. Round down each income and allotment calculation that ends in .01 through .49 cents and round up each calculation that ends in .50 through .99 cents.

(A) Total Gross Earned Income. To determine gross monthly earned income, add the gross monthly income earned by all household members (including self-employment income) less income exclusions. Net losses from a self-employed farmer shall be offset in accordance with 106 CMR 365.970(C): *Determining Monthly SNAP Income*.

(B) Earned Income Deduction. Multiply the gross earned income by 80% to determine monthly earned income.

(C) Unearned Income. Add the total monthly unearned income of all household members, less income exclusions, to the net monthly earned income.

(D) Standard Deduction. Subtract the standard deduction for the household size. *See* 106 CMR 364.400.

(E) Medical Expenses. Total the allowable medical expenses, less reimbursements (for example, by a third-party insurer) for those household members who meet one of the requirements of 106 CMR 361.210: *Elderly or Disabled Individuals*.

If these costs exceed \$35 per month, go to the next step. If these costs are \$35 or less, go to 106 CMR 364.500(G).

(F) Medical Deduction.

(1) For medical expenses between \$35, and \$190 per month, subtract \$155.

(2) For medical expenses that exceed \$190 per month, subtract the amount that exceeds \$35.

(G) Dependent Care Deduction. Subtract the actual monthly dependent care expenses, if any, as provided in 106 CMR 364.400(D) and 364.410.

(H) Allowable Child Support Payments. Subtract allowable monthly child support payments.

(I) Allowable Homeless Shelter/Utility Deduction. Subtract the allowable homeless shelter/utility deduction, if applicable.

(J) Excess Shelter Expense. Total the allowable shelter expenses, unless a homeless shelter deduction was provided. Subtract 50% of the household's preliminary adjusted net income (monthly income after all the above deductions have been subtracted) from the total shelter expenses. The remaining amount, if any, is the excess shelter expense. If there is no excess shelter expense, the household's net monthly income has been determined. If there is excess shelter expense, go to the next step.

364.500: continued

(K) Shelter Deduction. Subtract the full amount of the excess shelter expense if the household contains an elderly or disabled member who meets one of the requirements of 106 CMR 361.210: *Elderly or Disabled Individuals*. For all other households, subtract the excess shelter expense up to the maximum deduction amount. This shelter deduction amount is posted at www.mass.gov/dta.

364.550: Determining Eligibility Based on Net Income

All households must meet the net income standard, except for categorically eligible households, in accordance with 106 CMR 365.180: *Categorically Eligible Assistance Units*.

Households that contain an elderly or disabled member meeting one of the requirements of 106 CMR 361.210: *Elderly or Disabled Individuals* must have their income eligibility based solely on net income standards.

To determine eligibility with regard to net income standards, the household's net income must be compared to the Maximum Allowable Monthly Net Income Standards for the appropriate household size in accordance with 106 CMR 364.970. If the net income is greater than the standard, the household is ineligible. If the net income is equal to or less than the standard, the household is eligible with regard to net income.

364.600: Determining the Benefit Level

Once a household has been determined eligible for SNAP considering both nonfinancial and financial eligibility standards, the case manager must determine the household's benefit level or monthly allotment.

(A) Household Size - One to Eight. Refer to 106 CMR 364.980 to find the monthly allotment based on the household's monthly net income (using dollars and cents) and household size. Categorically eligible one- and two-person households are entitled to a minimum benefit, except in the initial certification month. This minimum benefit amount, is posted at www.mass.gov/dta.

Categorically eligible households with three or more members who do not qualify for a benefit because their income exceeds the level for which benefits are issued cannot be denied. These households must be suspended in accordance with 106 CMR 365.180: *Categorically Eligible Assistance Units*.

(B) Household Size - Over Eight.

(1) Determine the maximum allotment for the household size by adding the amount posted at www.mass.gov/dta for each individual in excess of eight to the maximum allotment for an eight-person household.

(2) Determine the household's monthly net income in accordance with 106 CMR 364.500.

(3) Multiply the household's monthly net income (using dollars and cents) by 30%. Drop any digits beyond the second decimal place. If the result is not whole dollars, round the result up to the next whole dollar.

(4) Subtract this 30% amount from the maximum allotment for the household size.

The resulting amount is the household's monthly allotment. However, when the calculated amount is zero or less, the household is ineligible for benefits since its net income exceeds the level at which benefits are issued.

(C) For households containing both SNAP members and legal noncitizens ineligible for SNAP benefits, the Department will:

(1) Step One: Calculate SNAP benefits using all household members, all household members' income and full deductions to determine the maximum SNAP benefits the household would be entitled to if all members were SNAP eligible.

(2) Step Two: Calculate the SNAP benefits for SNAP members excluding the income and deductions of legal noncitizens ineligible for SNAP benefits.

(3) Step Three: Compare the results from Step One and Step Two.

(a) If the Step Two amount exceeds or is equal to the Step One amount, the Department will pay the Step One amount as the SNAP benefit.

(b) If the Step Two amount is less than the Step One amount, the Department will pay the Step Two amount as the SNAP benefit.

364.650: Prorating Initial Month's Benefits

SNAP benefits for a household's initial month shall be prorated.

The initial month is the first month for which a household is certified to participate in SNAP following any period of time during which the household did not receive SNAP, except for migrant and seasonal farmworker households. For migrant and seasonal farmworker households, the initial month is the first month for which a household is certified to participate in SNAP following any period of more than one month during which the household did not receive SNAP. A migrant or seasonal farmworker household that has received SNAP within the month before application is entitled to a full month's benefits.

Households which apply for initial benefits after the 15th day of the month and are determined eligible for expedited SNAP benefits in accordance with 106 CMR 365.800: *Expedited Service*, must be issued a combined allotment. A combined allotment includes the initial month's prorated benefits plus the second month's full allotment. Combined allotments must be issued within the seven-day expedited service time frame.

Proration is the issuance of that portion of a household's monthly SNAP benefit, as calculated in accordance with 106 CMR 364.600, which corresponds to the period of time from the date of application to the end of the month.

For a household with a monthly allotment of \$400 or less, the initial month's allotment is determined in accordance with 106 CMR 364.990. For a household with a monthly allotment greater than \$400, the initial month's allotment is calculated as follows:

(A) Count the number of days from the first day of the household's cyclical month through the date of application, inclusive, to determine the day of the cyclical month. If the day of the cyclical month is 31, use the number 30 instead of 31. Subtract the day of the cyclical month from 31.

Multiply the result by the household's monthly allotment. Divide the result of this by 30;

(B) If the result of 106 CMR 364.650(A) is not a whole dollar, round the result down to the next whole dollar by dropping cents; then

(C) If the result of 106 CMR 364.650(B), is less than \$10, no benefits shall be issued for the initial month.

364.700: Assigning Certification Periods

Definite time periods are established within which households are eligible to receive benefits. This is the certification period. At the end of the certification period, benefits will be terminated without the right to a pretermination hearing for any household that fails, without good cause, to timely comply with its responsibilities for recertification.

(A) Conformance with Cyclical Months. Certification periods shall conform to cyclical months. At initial application, the first month in the certification period is generally the month of application, even if the household's eligibility is not determined until a subsequent month.

(B) Length of Certification Periods. The certification period shall not exceed 12 months, except that a certification period may last up to 24 months if all adult household members are elderly or disabled and meet the requirements of 106 CMR 361.210: *Elderly or Disabled Individuals*. The Department must have at least one contact with each certified household every 12 months.

364.710: Household Certification Periods

Households shall be assigned certification periods based on the predictability of change in the household circumstances.

364.810: Notice of Eligibility

A Notice of Eligibility shall be sent to all applicant households determined eligible to participate in SNAP and shall contain the following information.

364.810: continued

- (A) The amount of the monthly allotment including any variations in the allotment based on changes. If the initial allotment contains benefits for both the month of application and the current month's benefits, the notice shall explain that the initial allotment includes more than one month's benefits, and shall indicate the allotment amount for the remainder of the certification period.
- (B) The notice shall advise Public Assistance (PA) households receiving SNAP benefits pending the approval of the PA grant that SNAP benefits will be decreased upon receipt of that PA grant.
- (C) The beginning and ending months of the certification period must be in the notice. For households certified one or two months, the Notice of Eligibility shall be combined with the Notice of Recertification. For households certified three months or longer, the notice shall include a reminder of the need to reapply for continued certification at the end of the certification period. For PA households, the notice shall state that the household's certification period will expire the month after the next PA redetermination or in one year, which ever occurs first.
- (D) The notice shall also advise the household of its rights to a fair hearing, the telephone number of the Department, and, if possible, the name of the individual to contact for additional information.
- (E) The notice shall advise the household if there is an individual or organization available that provides free legal representation and the notice shall also advise the household of the availability of such services.
- (F) The Department may include in the notice a reminder of the household's obligation to report changes in circumstance, or other information which would be useful to the household.
- (G) The notice shall inform households whose application is approved on an expedited basis without verification that the household must provide the needed verifications that were waived, and the consequences if the household does not provide the verification.

364.820: Notice of Pending/Denial

A Notice of Pending/Denial shall be sent to households when a household's application is incomplete because some action by the worker or the household or both is needed to complete the application process or when a household is ineligible for SNAP benefits. The Notice of Pending/Denial shall contain the following information.

- (A) If some action by the worker is needed to complete the application, the notice must inform the household that its application has not been completed and is being processed.
- (B) If some action by the household is needed to complete the application, the notice must inform the household that its application has not been completed and is being processed, and what action the household must take to complete the application and that if the action is not taken within 60 days of the date the application was filed, SNAP benefits will be denied with no further notice to the household.
- (C) If some action by both the household and the worker is needed to complete the application, the notice must inform the household that its application has not been completed and what action the household must take before the application can be completed. The notice must also inform the household that if the action is not taken within 60 days of the date of application, SNAP benefits will be denied with no further notice to the household.
- (D) For households found ineligible, the notice must contain the basis for the denial.
- (E) The household's right to request a fair hearing, the telephone number of the Department, and if possible, the name of the individual to contact for additional information.

364.820: continued

(F) If there is an individual or organization available that provides free legal representation, the notice shall also advise the household of the availability of this service.

364.830: Notice of Increase

A Notice of Increase shall be sent to households when a change reported during the certification period results in an increase in the household's benefit level. The Notice of Increase shall include the following information:

(A) For changes that result in increased benefits, the notice shall inform the household of the new monthly allotment and of the date the new monthly allotment becomes effective. The notice shall also inform the household of the date by which the change must be verified and the consequences of not verifying the change; and

(B) The household's right to a fair hearing, the telephone number of the Department, and the name of the individual to contact for additional information.

364.840: Notice of SNAP Termination

A Notice of Expiration shall be issued to all SNAP households before the end of their certification period. For households certified for three months or longer, the notice shall be sent no earlier than the first day of the next to last month of certification or no later than the last day of the next to last month of certification. When the Department cannot provide the notice by this date, because the household is certified for two months or less, the notice shall be provided at the time of certification. The Notice of Expiration shall contain the following information:

(A) The date the current certification period ends;

(B) The date by which the household must file an application for recertification to receive uninterrupted benefits;

(C) Notice that the household must appear for any interview scheduled on or after the date the application is timely filed in order to receive uninterrupted benefits;

(D) Notice that the household is responsible for rescheduling any missed interview;

(E) Notice that the household must complete the interview process and provide all required verification in order to receive uninterrupted benefits;

(F) If applicable, the number of days the household has for submitting missing verification, after the Department informs the household at the interview of any further verification needed to receive uninterrupted benefits;

(G) The right to request an application and have it accepted by the Department as long as it is signed and contains a legible name and address;

(H) The address of the Department where the application must be filed;

(I) The consequences of not complying with the Notice of Expiration;

(J) The household's right to file the application by mail, fax, online or through an authorized representative;

(K) The household's right to a fair hearing; and

(L) The right to apply for SNAP recertification at an office of the Social Security Administration (SSA) if all members of the household are applicants or recipients of Supplemental Security Income (SSI).

364.850: Using the Change Report Form

The Change Report Form, shall be provided to all appropriate households at initial certification, whenever a Change Report Form is returned by a household, and at recertification, if the household needs a new Change Report Form.

364.860: Notice of Adverse Action

The Notice of Adverse Action shall be sent to all households prior to terminating or reducing benefits, except as provided in 106 CMR 366.210: *Changes not Requiring Advance Notice* to ensure timely and adequate advance notice of the proposed action. The Notice of Adverse Action shall include the following information:

- (A) The proposed action;
- (B) The reason for the proposed action;
- (C) The household's right to request a fair hearing;
- (D) The telephone number and, if possible, the name of the individual to contact for additional information;
- (E) The availability of continued benefits and the date by which a hearing request must be filed to ensure such continuation;
- (F) The liability of the household for any overissuance received while awaiting a fair hearing, if the hearing official's decision is adverse to the household; and
- (G) If there is an individual or organization that provides free legal representation, the notice shall also advise the household of the availability of the service.

364.870: Unintentional Program Violation Claim Demand Letter

The Unintentional Program Violation Claim Demand Letter shall be sent to all households whenever an overissuance of SNAP benefits occurs unless the amount of the claim is less than \$125 or the minimum recovery threshold established by the Department, whichever is higher, unless the household is currently receiving SNAP benefits or the household cannot be located. The Claim Demand Letter shall contain the following information:

- (A) The amount owed;
- (B) The reason for the claim;
- (C) The period of time the claim covers;
- (D) Any offsetting that was done to reduce the claim; and
- (E) The household's right to a fair hearing if the household disagrees with the Department's determination.

The household's repayment options shall be included in the Repayment Agreement in accordance with 106 CMR 367.495(E): *Collecting Claims for Unintentional Program Violation*.

364.880: Intentional Program Violation Claim Demand Letter

The Intentional Program Violation Claim Demand Letter shall be sent to households that have been found to have committed an Intentional Program Violation, by either an Administrative Disqualification Hearing or a court of appropriate jurisdiction, have filed a signed and accepted waiver, in accordance with 106 CMR 367.660: *Waiver of an ADH* or entered into a consent agreement with a court. The Intentional Program Violation Claim Demand Letter must be sent even if the household has already received a Claim Demand Letter. The Intentional Program Violation Claim Demand Letter shall contain the following information:

364.880: continued

- (A) The amount owed;
- (B) The reason for the claim;
- (C) The period of time the claim covers;
- (D) Any offsetting that was done to reduce the claim; and
- (E) The household's right to a Fair Hearing if the household disagrees with the Department's determination of the amount of the claim, unless a fair hearing is consolidated with the Administrative Disqualification Hearing to determine the amount of the claim.

The household's repayment options shall be included in the repayment agreement letter in accordance with 106 CMR 367.825(C).

364.895: Notice of Restoration of Lost Benefits

The Notice of Restoration of Lost Benefits shall be sent to all households entitled to restored benefits. The Notice of Restoration of Lost Benefits shall contain the following information:

- (A) The amount of benefits to be restored;
- (B) Any offsetting that was done;
- (C) The method of restoration;
- (D) The date the restoration will be completed; and
- (E) The household's right to a fair hearing if it disagrees with any aspect of the proposed restoration.

364.900: Delivery of Benefits

Eligible households shall be issued SNAP benefits for each month of eligibility.

SNAP benefits can be accessed by using an Electronic Benefit Transfer (EBT) card for food purchases at grocery and other participating stores and farmers markets.

(A) Initial SNAP Benefit Issuance.

(1) Expedited SNAP Benefit Issuance. The Department shall provide SNAP benefits to households that qualify for expedited service using expedited processing standards. The conditions for expedited eligibility are provided at 106 CMR 365.800 through 365.850.

(2) Normal SNAP Benefit Issuance. The Department shall provide SNAP benefits to households that do not qualify for expedited service using normal processing standards. The time frames for the delivery of Normal SNAP Benefits are provided at 106 CMR 361.080: *Prompt Action*.

(B) Additional SNAP Benefit Issuance. The Department shall provide additional SNAP benefits, as well as the household's monthly SNAP benefit allotment, when the household qualifies for increased benefits because of certain changes in the household's circumstances. The conditions of eligibility and the time frames for the delivery of Additional SNAP Benefits are provided at 106 CMR 366.120(A): *Increases in Benefit Level Requiring Expedited Action*.

(C) Replacement of Benefits after Household Misfortune. The Department shall replace SNAP benefits when a household's food purchased with benefits has been destroyed in a household misfortune as defined in 106 CMR 360.030: *Definitions* when the following conditions are met.

(1) Conditions of Replacement.

(a) The household must report the destruction of food purchased with SNAP benefits to the Department within ten days of the date of the destruction.

364.900: continued

(b) The household must sign a statement attesting to the destruction of the food purchased with SNAP benefits and the reason for the replacement. It shall also state that the household is aware of the penalties for intentional misrepresentation of facts, including the penalties for Intentional Program Violations and a charge of perjury for making a false claim.

The statement must be received by the Department within ten days of the date of the report. If the tenth day falls on a weekend or holiday, and the statement is received the day after the weekend or holiday, the Department shall consider the statement timely received.

(c) The Department must verify the destruction occurred in a household misfortune through a collateral contact, documentation from a community agency (*e.g.*, fire department, police department, Red Cross), or a home visit.

(2) Restrictions on Replacement.

(a) The replacement allotment shall be provided in the amount of the loss to the household, up to a maximum of one month's allotment for the household's size, unless the allotment includes restored benefits, which shall be replaced up to their full value.

(b) Where a federal disaster declaration has been issued and the household is eligible for disaster SNAP benefits, the household shall not receive both a disaster allotment and a replacement allotment for household misfortune.

(3) Time Frame for Delivery of Benefits.

(a) Replacement benefits shall be issued within ten days after the report of destruction or within two working days of receiving the signed household statement, whichever is later.

(b) The Department shall deny or delay replacement issuances in cases in which available documentation indicates that the household request for replacement is fraudulent.

(D) SNAP Benefits. Except as described in 106 CMR 364.900(C), SNAP benefits will not be replaced. It is the responsibility of the client or the authorized representative to keep the EBT Card and Personal Identification Number (PIN) safe from unauthorized users.

(E) Purging of SNAP Benefits. When SNAP benefits have not been accessed for a total of 365 days, the SNAP benefits will be permanently purged from the EBT system.

(F) SNAP Benefit Issuance After Recertification. Households determined eligible after a timely recertification are entitled to uninterrupted SNAP benefits. SNAP benefits must be made available for the household on the household's normal issuance date.

364.910: Benefit Access Cards

(A) Requirements. The individual authorized to access the household's SNAP benefits shall have an Electronic Benefit Transfer (EBT) card issued by the Department. This individual may be the primary applicant, another household member or an authorized representative. When an EBT card is issued to someone other than the individual in whose name the SNAP benefits are issued, the EBT shall contain the name of the individual in whose name the SNAP benefits are issued and the name of the individual authorized to access the SNAP benefits. If requested by the individual in whose name the SNAP benefits are issued, an EBT card may be issued to both the head of household and the individual authorized to access the SNAP benefits.

The primary applicant and/or the individual authorized to access the SNAP benefits must be informed that the Department may conduct matches authorized by law for the purposes of verifying eligibility and the effective administration of the Department's programs.

(B) Emergency EBT Cards. Emergency EBT Cards shall be issued to the individual in whose name the SNAP benefits are issued, or the authorized representative. When the Department is unable to issue an initial or replacement EBT card because the Department's card issuance system is not functioning, the Emergency EBT Card will be valid for five days.

364.910: continued

(C) Replacement Fee. The Department may charge a fee to replace EBT Cards. This fee shall be deducted directly from the recipient's cash assistance benefits, if any. If no cash assistance benefits are available, the Department may deduct the fee from the recipient's SNAP benefits.

106 CMR 364.910(C) does not apply to disaster SNAP EBT cards issued in accordance with 106 CMR 366.620(B)(4).

364.945: The Standard Utility Allowances (SUA)

The Standard Utility Allowances (SUAs) are updated periodically using a methodology approved by the United States Department of Agriculture/Food and Nutrition Service (USDA/FNS). The SUA standards are posted at www.mass.gov/dta.

364.946: Disaster SNAP Maximum Gross Monthly Income and Asset Standard

The Disaster SNAP Maximum Gross Monthly Income and Asset Standards are based on household size and are adjusted annually by USDA/FNS. These standards are posted at www.mass.gov/dta. Paper copies are available upon request.

For more details on the Disaster SNAP Program, see 106 CMR 366.600: *Disaster Certification*.

364.950: Maximum Gross Monthly Income Standards

The Maximum Gross Monthly Income Standards are based on household size and are adjusted annually by USDA/FNS. These standards are posted at www.mass.gov/dta.

For more details on determining eligibility based on gross income, see 106 CMR 364.370.

Public Assistance categorically eligible households do not have to meet the gross income eligibility standards. SNAP-only TANF Services Households are subject to the Gross Monthly Categorical Eligibility Standards at 106 CMR 364.976.

364.970: Maximum Allowable Monthly Net Income Standards

The Maximum Allowable Net Income Standards are based on household size and are adjusted annually by USDA/FNS. These standards are posted at www.mass.gov/dta.

For more details on determining eligibility based on net income, see 106 CMR 364.550.

Public Assistance categorically eligible households do not have to meet either the gross or net income eligibility standards. SNAP-only TANF Services Households are subject to the Gross Monthly Categorical Eligibility Standards at 106 CMR 364.976.

364.975: Standards for Special Circumstances Involving an Elderly and Disabled Individual

The Standards for Special Circumstances Involving an Elderly and Disabled Individual are based on household size and are adjusted annually by USDA/FNS. These standards are posted at www.mass.gov/dta.

For more details on determining eligibility for special situations involving an elderly and disabled individual, see 106 CMR 361.200(B)(4)(a) and (b).

364.976: Gross Monthly Categorical Eligibility Income Standards

The Gross Monthly Categorical Eligibility Standards are based on household size and are adjusted annually based on the federal poverty level. These standards are posted at www.mass.gov/dta.

For more details on determining categorical eligibility, see 106 CMR 365.180: *Categorically Eligible Assistance Units*.

364.980: SNAP Issuance Tables

A client who is eligible for SNAP benefits will receive 100% of the SNAP benefit allotment listed in the Program Issuance Tables.

The standards in the SNAP Issuance Tables are based on household size and are adjusted annually by USDA/FNS. These standards are posted at www.mass.gov/dta.

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12	12	11	11	10	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	13	12	12	11	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	14	13	13	12	12	11	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	15	14	14	13	13	12	12	11	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	16	15	14	14	13	13	12	12	11	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	17	16	15	15	14	14	13	13	12	11	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	18	17	16	16	15	15	14	13	13	12	12	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	19	18	17	17	16	15	15	14	13	13	12	12	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	20	19	18	18	17	16	16	15	14	14	13	12	12	11	10	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	21	20	19	18	18	17	16	16	15	14	14	13	12	11	11	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	22	21	20	19	19	18	17	16	16	15	14	13	13	12	11	11	10	0	0	0	0	0	0	0	0	0	0	0	0	0
23	23	22	21	20	19	19	18	17	16	16	15	14	13	13	12	11	10	0	0	0	0	0	0	0	0	0	0	0	0	0
24	24	23	22	21	20	20	19	18	17	16	16	15	14	13	12	12	11	10	0	0	0	0	0	0	0	0	0	0	0	0
25	25	24	23	22	21	20	20	19	18	17	16	15	15	14	13	12	11	10	10	0	0	0	0	0	0	0	0	0	0	0
26	26	25	24	23	22	21	20	19	19	18	17	16	15	14	13	13	12	11	10	0	0	0	0	0	0	0	0	0	0	0
27	27	26	25	24	23	22	21	20	19	18	18	17	16	15	14	13	12	11	10	0	0	0	0	0	0	0	0	0	0	0
28	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	14	13	12	11	10	0	0	0	0	0	0	0	0	0	0
29	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	0	0	0	0	0	0	0	0	0	0
30	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	0	0	0	0	0	0	0	0	0
31	31	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	0	0	0	0	0	0	0	0	0
32	32	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	14	13	12	11	10	0	0	0	0	0	0	0	0	0
33	33	31	30	29	28	27	26	25	24	23	22	20	19	18	17	16	15	14	13	12	11	0	0	0	0	0	0	0	0	0
34	34	32	31	30	29	28	27	26	24	23	22	21	20	19	18	17	15	14	13	12	11	10	0	0	0	0	0	0	0	0
35	35	33	32	31	30	29	28	26	25	24	23	22	21	19	18	17	16	15	14	12	11	10	0	0	0	0	0	0	0	0
36	36	34	33	32	31	30	28	27	26	25	24	22	21	20	19	18	16	15	14	13	12	10	0	0	0	0	0	0	0	0
37	37	35	34	33	32	30	29	28	27	25	24	23	22	20	19	18	17	16	14	13	12	11	0	0	0	0	0	0	0	0
38	38	36	35	34	32	31	30	29	27	26	25	24	22	21	20	19	17	16	15	13	12	11	10	0	0	0	0	0	0	0
39	39	37	36	35	33	32	31	29	28	27	26	24	23	22	20	19	18	16	15	14	13	11	10	0	0	0	0	0	0	0
40	40	38	37	36	34	33	32	30	29	28	26	25	24	22	21	20	18	17	16	14	13	12	10	0	0	0	0	0	0	0
41	41	39	38	36	35	34	32	31	30	28	27	25	24	23	21	20	19	17	16	15	13	12	10	0	0	0	0	0	0	0
42	42	40	39	37	36	35	33	32	30	29	28	26	25	23	22	21	19	18	16	15	14	12	11	0	0	0	0	0	0	0
43	43	41	40	38	37	35	34	32	31	30	28	27	25	24	22	21	20	18	17	15	14	12	11	10	0	0	0	0	0	0
44	44	42	41	39	38	36	35	33	32	30	29	27	26	24	23	22	20	19	17	16	14	13	11	10	0	0	0	0	0	0
45	45	43	42	40	39	37	36	34	33	31	30	28	27	25	24	22	21	19	18	16	15	13	12	10	0	0	0	0	0	0
46	46	44	42	41	39	38	36	35	33	32	30	29	27	26	24	23	21	19	18	16	15	13	12	10	0	0	0	0	0	0
47	47	45	43	42	40	39	37	36	34	32	31	29	28	26	25	23	21	20	18	17	15	14	12	10	0	0	0	0	0	0
48	48	46	44	43	41	40	38	36	35	33	32	30	28	27	25	24	22	20	19	17	16	14	12	11	0	0	0	0	0	0
49	49	47	45	44	42	40	39	37	35	34	32	31	29	27	26	24	22	21	19	17	16	14	13	11	0	0	0	0	0	0
50	50	48	46	45	43	41	40	38	36	35	33	31	30	28	26	25	23	21	20	18	16	15	13	11	10	0	0	0	0	0
51	51	49	47	45	44	42	40	39	37	35	34	32	30	28	27	25	23	22	20	18	17	15	13	11	10	0	0	0	0	0
52	52	50	48	46	45	43	41	39	38	36	34	32	31	29	27	26	24	22	20	19	17	15	13	12	10	0	0	0	0	0
53	53	51	49	47	45	44	42	40	38	37	35	33	31	30	28	26	24	22	21	19	17	15	14	12	10	0	0	0	0	0
54	54	52	50	48	46	45	43	41	39	37	36	34	32	30	28	27	25	23	21	19	18	16	14	12	10	0	0	0	0	0
55	55	53	51	49	47	45	44	42	40	38	36	34	33	31	29	27	25	23	22	20	18	16	14	12	11	0	0	0	0	0
56	56	54	52	50	48	46	44	42	41	39	37	35	33	31	29	28	26	24	22	20	18	16	14	13	11	0	0	0	0	0
57	57	55	53	51	49	47	45	43	41	39	38	36	34	32	30	28	26	24	22	20	19	17	15	13	11	0	0	0	0	0
58	58	56	54	52	50	48	46	44	42	40</																				

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
61	61	58	56	54	52	50	48	46	44	42	40	38	36	34	32	30	28	26	24	22	20	18	16	14	12	10	0	0	0	0
62	62	59	57	55	53	51	49	47	45	43	41	39	37	35	33	31	28	26	24	22	20	18	16	14	12	10	0	0	0	0
63	63	60	58	56	54	52	50	48	46	44	42	39	37	35	33	31	29	27	25	23	21	18	16	14	12	10	0	0	0	0
64	64	61	59	57	55	53	51	49	46	44	42	40	38	36	34	32	29	27	25	23	21	19	17	14	12	10	0	0	0	0
65	65	62	60	58	56	54	52	49	47	45	43	41	39	36	34	32	30	28	26	23	21	19	17	15	13	10	0	0	0	0
66	66	63	61	59	57	55	52	50	48	46	44	41	39	37	35	33	30	28	26	24	22	19	17	15	13	11	0	0	0	0
67	67	64	62	60	58	55	53	51	49	46	44	42	40	37	35	33	31	29	26	24	22	20	17	15	13	11	0	0	0	0
68	68	65	63	61	58	56	54	52	49	47	45	43	40	38	36	34	31	29	27	24	22	20	18	15	13	11	0	0	0	0
69	69	66	64	62	59	57	55	52	50	48	46	43	41	39	36	34	32	29	27	25	23	20	18	16	13	11	0	0	0	0
70	70	67	65	63	60	58	56	53	51	49	46	44	42	39	37	35	32	30	28	25	23	21	18	16	14	11	0	0	0	0
71	71	68	66	63	61	59	56	54	52	49	47	44	42	40	37	35	33	30	28	26	23	21	18	16	14	11	0	0	0	0
72	72	69	67	64	62	60	57	55	52	50	48	45	43	40	38	36	33	31	28	26	24	21	19	16	14	12	0	0	0	0
73	73	70	68	65	63	60	58	55	53	51	48	46	43	41	38	36	34	31	29	26	24	21	19	17	14	12	0	0	0	0
74	74	71	69	66	64	61	59	56	54	51	49	46	44	41	39	37	34	32	29	27	24	22	19	17	14	12	0	0	0	0
75	75	72	70	67	65	62	60	57	55	52	50	47	45	42	40	37	35	32	30	27	25	22	20	17	15	12	10	0	0	0
76	76	73	70	68	65	63	60	58	55	53	50	48	45	43	40	38	35	32	30	27	25	22	20	17	15	12	10	0	0	0
77	77	74	71	69	66	64	61	59	56	53	51	48	46	43	41	38	35	33	30	28	25	23	20	17	15	12	10	0	0	0
78	78	75	72	70	67	65	62	59	57	54	51	49	46	44	41	39	36	33	31	28	26	23	20	18	15	12	10	0	0	0
79	79	76	73	71	68	65	63	60	57	55	52	50	47	44	42	39	36	34	31	28	26	23	21	18	15	13	10	0	0	0
80	80	77	74	72	69	66	64	61	58	56	53	50	48	45	42	40	37	34	32	29	26	24	21	18	16	13	10	0	0	0
81	81	78	75	72	70	67	64	62	59	56	53	51	48	45	43	40	37	35	32	29	27	24	21	18	16	13	10	0	0	0
82	82	79	76	73	71	68	65	62	60	57	54	51	49	46	43	41	38	35	32	30	27	24	21	19	16	13	10	0	0	0
83	83	80	77	74	71	69	66	63	60	58	55	52	49	47	44	41	38	35	33	30	27	24	22	19	16	13	11	0	0	0
84	84	81	78	75	72	70	67	64	61	58	55	53	50	47	44	42	39	36	33	30	28	25	22	19	16	13	11	0	0	0
85	85	82	79	76	73	70	68	65	62	59	56	53	51	48	45	42	39	36	34	31	28	25	22	19	17	14	11	0	0	0
86	86	83	80	77	74	71	68	65	63	60	57	54	51	48	45	43	40	37	34	31	28	25	22	20	17	14	11	0	0	0
87	87	84	81	78	75	72	69	66	63	60	57	55	52	49	46	43	40	37	34	31	29	26	23	20	17	14	11	0	0	0
88	88	85	82	79	76	73	70	67	64	61	58	55	52	49	46	44	41	38	35	32	29	26	23	20	17	14	11	0	0	0
89	89	86	83	80	77	74	71	68	65	62	59	56	53	50	47	44	41	38	35	32	29	26	23	20	17	14	11	0	0	0
90	90	86	84	81	77	75	72	68	66	63	59	57	54	50	48	45	41	39	36	32	30	27	23	21	18	14	12	0	0	0
91	91	87	84	81	78	75	72	69	66	63	60	57	54	51	48	45	42	39	36	33	30	27	24	21	18	15	12	0	0	0
92	92	88	85	82	79	76	73	70	67	64	61	58	55	52	49	46	42	39	36	33	30	27	24	21	18	15	12	0	0	0
93	93	89	86	83	80	77	74	71	68	65	61	58	55	52	49	46	43	40	37	34	31	27	24	21	18	15	12	0	0	0
94	94	90	87	84	81	78	75	72	68	65	62	59	56	53	50	47	43	40	37	34	31	28	25	21	18	15	12	0	0	0
95	95	91	88	85	82	79	76	72	69	66	63	60	57	53	50	47	44	41	38	34	31	28	25	22	19	15	12	0	0	0
96	96	92	89	86	83	80	76	73	70	67	63	60	57	54	51	48	44	41	38	35	32	28	25	22	19	15	12	0	0	0
97	97	93	90	87	84	80	77	74	71	67	64	61	58	54	51	48	45	42	38	35	32	29	25	22	19	16	12	0	0	0
98	98	94	91	88	84	81	78	75	71	68	65	62	58	55	52	49	45	42	39	35	32	29	26	22	19	16	13	0	0	0
99	99	95	92	89	85	82	79	75	72	69	65	62	59	56	52	49	46	42	39	36	33	29	26	23	19	16	13	0	0	0
100	100	96	93	90	86	83	80	76	73	70	66	63	60	56	53	50	46	43	40	36	33	30	26	23	20	16	13	10	0	0
101	101	97	94	90	87	84	80	77	74	70	67	63	60	57	53	50	47	43	40	37	33	30	26	23	20	16	13	10	0	0
102	102	98	95	91	88	85	81	78	74	71	67	64	61	57	54	51	47	44	40	37	34	30	27	23	20	16	13	10	0	0
103	103	99	96	92	89	85	82	78	75	72	68	65	61	58	54	51	48	44	41	37	34	30	27	24	20	17	13	10	0	0
104	104	100	97	93	90	86	83	79	76	72	69	65	62	58	55	52	48	45	41	38	34	31	27	24	20	17	13	10	0	0
105	105	101	98	94	90	87	84	80	77	73	69	66	63	59	56	52	48	45	42	38	35	31	27	24	21	17	14	10	0	0
106	106	102	98	95	91	88	84	81	77	74	70	67	63	60	56	53	49	45	42	38	35	31	28	24	21	17	14	10	0	0
107	107	103	99	96	92	89	85	82	78	74	71	67	64	60	57	53	49	46	42	39	35	32	28	24	21	17	14	10	0	0
108	108	104	100	97	93	90	86	82	79	75	71	68	64	61	57	54	50	46	43	39	36	32	28	25	21	17	14	10	0	0
109	109	105	101	98	94	90	87	83	79	76	72	69	65	61	58	54	50	47	43	39	36	32	29	25	21	18	14	10	0	0
110	110	106	102	99	95	91	88	84	80	77	73	69	66	62	58	55	51	47	44	40	36	33	29	25	22	18	14	11	0	0
111	111	107	103	99	96	92	88	85	81	77	73	70	66	62	59	55	51	48	44	40	37	33	29	25	22	18	14	11	0	0
112	112	108	104	100	97	93	89	85	82	78	74	70	67	63	59	56	52	48	44	41	37	33	29	26	22	18	14	11	0	0
113	113	109	105	101	97	94	90	86	82	79	75	71	67	64	60	56	52	48	45	41	37	33	30	26	22	18	15	11	0	0
114	114	110	106	102	98	95	91	87	83	79	75	72	68	64	60	57	53	49	45	41	38	34	30	26	22	18	15	11	0	0
115	115	111	107	103	99	95	92</																							

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
121	121	116	112	108	104	100	96	92	88	84	80	76	72	68	64	60	56	52	48	44	40	36	32	28	24	20	16	12	0	0
122	122	117	113	109	105	101	97	93	89	85	81	77	73	69	65	61	56	52	48	44	40	36	32	28	24	20	16	12	0	0
123	123	118	114	110	106	102	98	94	90	86	81	77	73	69	65	61	57	53	49	45	41	36	32	28	24	20	16	12	0	0
124	124	119	115	111	107	103	99	95	90	86	82	78	74	70	66	62	57	53	49	45	41	37	33	28	24	20	16	12	0	0
125	125	120	116	112	108	104	100	95	91	87	83	79	75	70	66	62	58	54	50	45	41	37	33	29	25	20	16	12	0	0
126	126	121	117	113	109	105	100	96	92	88	83	79	75	71	67	63	58	54	50	46	42	37	33	29	25	20	16	12	0	0
127	127	122	118	114	110	105	101	97	93	88	84	80	76	71	67	63	59	55	50	46	42	38	33	29	25	21	16	12	0	0
128	128	123	119	115	110	106	102	98	93	89	85	81	76	72	68	64	59	55	51	46	42	38	34	29	25	21	17	12	0	0
129	129	124	120	116	111	107	103	98	94	90	85	81	77	73	68	64	60	55	51	47	43	38	34	30	25	21	17	12	0	0
130	130	125	121	117	112	108	104	99	95	91	86	82	78	73	69	65	60	56	52	47	43	39	34	30	26	21	17	13	0	0
131	131	126	122	117	113	109	104	100	96	91	87	82	78	74	69	65	61	56	52	48	43	39	34	30	26	21	17	13	0	0
132	132	127	123	118	114	110	105	101	96	92	87	83	79	74	70	66	61	57	52	48	44	39	35	30	26	21	17	13	0	0
133	133	128	124	119	115	110	106	101	97	93	88	84	79	75	70	66	62	57	53	48	44	39	35	31	26	22	17	13	0	0
134	134	129	125	120	116	111	107	102	98	93	89	84	80	75	71	67	62	58	53	49	44	40	35	31	26	22	17	13	0	0
135	135	130	126	121	116	112	108	103	99	94	89	85	81	76	72	67	62	58	54	49	45	40	35	31	27	22	18	13	0	0
136	136	131	126	122	117	113	108	104	99	95	90	86	81	77	72	68	63	58	54	49	45	40	36	31	27	22	18	13	0	0
137	137	132	127	123	118	114	109	105	100	95	91	86	82	77	73	68	63	59	54	50	45	41	36	31	27	22	18	13	0	0
138	138	133	128	124	119	115	110	105	101	96	91	87	82	78	73	69	64	59	55	50	46	41	36	32	27	22	18	13	0	0
139	139	134	129	125	120	115	111	106	101	97	92	88	83	78	74	69	64	60	55	50	46	41	37	32	27	23	18	13	0	0
140	140	135	130	126	121	116	112	107	102	98	93	88	84	79	74	70	65	60	56	51	46	42	37	32	28	23	18	14	0	0
141	141	136	131	126	122	117	112	108	103	98	93	89	84	79	75	70	65	61	56	51	47	42	37	32	28	23	18	14	0	0
142	142	137	132	127	123	118	113	108	104	99	94	89	85	80	75	71	66	61	56	52	47	42	37	33	28	23	18	14	0	0
143	143	138	133	128	123	119	114	109	104	100	95	90	85	81	76	71	66	61	57	52	47	42	38	33	28	23	19	14	0	0
144	144	139	134	129	124	120	115	110	105	100	95	91	86	81	76	72	67	62	57	52	48	43	38	33	28	23	19	14	0	0
145	145	140	135	130	125	120	116	111	106	101	96	91	87	82	77	72	67	62	58	53	48	43	38	33	29	24	19	14	0	0
146	146	141	136	131	126	121	116	111	107	102	97	92	87	82	77	73	68	63	58	53	48	43	38	34	29	24	19	14	0	0
147	147	142	137	132	127	122	117	112	107	102	97	93	88	83	78	73	68	63	58	53	49	44	39	34	29	24	19	14	0	0
148	148	143	138	133	128	123	118	113	108	103	98	93	88	83	78	74	69	64	59	54	49	44	39	34	29	24	19	14	0	0
149	149	144	139	134	129	124	119	114	109	104	99	94	89	84	79	74	69	64	59	54	49	44	39	34	29	24	19	14	0	0
150	150	144	140	135	129	125	120	114	110	105	99	95	90	84	80	75	69	65	60	54	50	45	39	35	30	24	20	15	0	0
151	151	145	140	135	130	125	120	115	110	105	100	95	90	85	80	75	70	65	60	55	50	45	40	35	30	25	20	15	10	0
152	152	146	141	136	131	126	121	116	111	106	101	96	91	86	81	76	70	65	60	55	50	45	40	35	30	25	20	15	10	0
153	153	147	142	137	132	127	122	117	112	107	101	96	91	86	81	76	71	66	61	56	50	45	40	35	30	25	20	15	10	0
154	154	148	143	138	133	128	123	118	112	107	102	97	92	87	82	77	71	66	61	56	51	46	41	35	30	25	20	15	10	0
155	155	149	144	139	134	129	124	118	113	108	103	98	93	87	82	77	72	67	62	56	51	46	41	36	31	25	20	15	10	0
156	156	150	145	140	135	129	124	119	114	109	103	98	93	88	83	78	72	67	62	57	51	46	41	36	31	25	20	15	10	0
157	157	151	146	141	136	130	125	120	115	109	104	99	94	88	83	78	73	68	62	57	52	47	41	36	31	26	20	15	10	0
158	158	152	147	142	136	131	126	121	115	110	105	100	94	89	84	79	73	68	63	57	52	47	42	36	31	26	21	15	10	0
159	159	153	148	143	137	132	127	121	116	111	105	100	95	90	84	79	74	68	63	58	52	47	42	37	31	26	21	15	10	0
160	160	154	149	144	138	133	128	122	117	112	106	101	96	90	85	80	74	69	64	58	53	48	42	37	32	26	21	16	10	0
161	161	155	150	144	139	134	128	123	118	112	107	101	96	91	85	80	75	69	64	59	53	48	42	37	32	26	21	16	10	0
162	162	156	151	145	140	134	129	124	118	113	107	102	97	91	86	81	75	70	64	59	53	48	43	37	32	26	21	16	10	0
163	163	157	152	146	141	135	130	124	119	114	108	103	97	92	86	81	76	70	65	59	54	48	43	38	32	27	21	16	10	0
164	164	158	153	147	142	136	131	125	120	114	109	103	98	92	87	82	76	71	65	60	54	49	43	38	32	27	21	16	10	0
165	165	159	153	148	142	137	132	126	120	115	109	104	99	93	87	82	76	71	66	60	54	49	43	38	33	27	21	16	10	0
166	166	160	154	149	143	138	132	127	121	116	110	105	99	94	88	83	77	71	66	60	55	49	44	38	33	27	22	16	11	0
167	167	161	155	150	144	139	133	128	122	116	111	105	100	94	89	83	77	72	66	61	55	50	44	38	33	27	22	16	11	0
168	168	162	156	151	145	139	134	128	123	117	111	106	100	95	89	84	78	72	67	61	55	50	44	39	33	27	22	16	11	0
169	169	163	157	152	146	140	135	129	123	118	112	107	101	95	90	84	78	73	67	61	56	50	45	39	33	28	22	16	11	0
170	170	164	158	153	147	141	136	130	124	119	113	107	102	96	90	85	79	73	68	62	56	51	45	39	34	28	22	17	11	0
171	171	165	159	153	148	142	136	131	125	119	113	108	102	96	91	85	79	74	68	62	56	51	45	39	34	28	22	17	11	0
172	172	166	160	154	149	143	137	131	126	120	114	108	103	97	91	86	80	74												

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
181	181	174	168	162	156	150	144	138	132	126	120	114	108	102	96	90	84	78	72	66	60	54	48	42	36	30	24	18	12	0
182	182	175	169	163	157	151	145	139	133	127	121	115	109	103	97	91	84	78	72	66	60	54	48	42	36	30	24	18	12	0
183	183	176	170	164	158	152	146	140	134	128	121	115	109	103	97	91	85	79	73	67	60	54	48	42	36	30	24	18	12	0
184	184	177	171	165	159	153	147	141	134	128	122	116	110	104	98	92	85	79	73	67	61	55	49	42	36	30	24	18	12	0
185	185	178	172	166	160	154	148	141	135	129	123	117	111	104	98	92	86	80	74	67	61	55	49	43	37	30	24	18	12	0
186	186	179	173	167	161	154	148	142	136	130	123	117	111	105	99	93	86	80	74	68	61	55	49	43	37	30	24	18	12	0
187	187	180	174	168	162	155	149	143	137	130	124	118	112	105	99	93	87	81	74	68	62	56	49	43	37	31	24	18	12	0
188	188	181	175	169	162	156	150	144	137	131	125	119	112	106	100	94	87	81	75	68	62	56	50	43	37	31	25	18	12	0
189	189	182	176	170	163	157	151	144	138	132	125	119	113	107	100	94	88	81	75	69	62	56	50	44	37	31	25	18	12	0
190	190	183	177	171	164	158	152	145	139	133	126	120	114	107	101	95	88	82	76	69	63	57	50	44	38	31	25	19	12	0
191	191	184	178	171	165	159	152	146	140	133	127	120	114	108	101	95	89	82	76	70	63	57	50	44	38	31	25	19	12	0
192	192	185	179	172	166	159	153	147	140	134	127	121	115	108	102	96	89	83	76	70	63	57	51	44	38	31	25	19	12	0
193	193	186	180	173	167	160	154	147	141	135	128	122	115	109	102	96	90	83	77	70	64	57	51	45	38	32	25	19	12	0
194	194	187	181	174	168	161	155	148	142	135	129	122	116	109	103	97	90	84	77	71	64	58	51	45	38	32	25	19	12	0
195	195	188	181	175	168	162	156	149	142	136	129	123	117	110	103	97	90	84	78	71	64	58	51	45	39	32	25	19	12	0
196	196	189	182	176	169	163	156	150	143	137	130	124	117	111	104	98	91	84	78	71	65	58	52	45	39	32	26	19	13	0
197	197	190	183	177	170	164	157	151	144	137	131	124	118	111	105	98	91	85	78	72	65	59	52	45	39	32	26	19	13	0
198	198	191	184	178	171	164	158	151	145	138	131	125	118	112	105	99	92	85	79	72	65	59	52	46	39	32	26	19	13	0
199	199	192	185	179	172	165	159	152	145	139	132	126	119	112	106	99	92	86	79	72	66	59	53	46	39	33	26	19	13	0
200	200	193	186	180	173	166	160	153	146	140	133	126	120	113	106	100	93	86	80	73	66	60	53	46	40	33	26	20	13	0
201	201	194	187	180	174	167	160	154	147	140	133	127	120	113	107	100	93	87	80	73	66	60	53	46	40	33	26	20	13	0
202	201	195	188	181	175	168	161	154	148	141	134	127	121	114	107	101	94	87	80	74	67	60	53	47	40	33	26	20	13	0
203	203	196	189	182	175	169	162	155	148	142	135	128	121	115	108	101	94	87	81	74	67	60	54	47	40	33	27	20	13	0
204	204	197	190	183	176	169	163	156	149	142	135	129	122	115	108	102	95	88	81	74	67	61	54	47	40	33	27	20	13	0
205	205	198	191	184	177	170	164	157	150	143	136	129	123	116	109	102	95	88	82	75	68	61	54	47	41	34	27	20	13	0
206	206	199	192	185	178	171	164	157	151	144	137	130	123	116	109	103	96	89	82	75	68	61	54	48	41	34	27	20	13	0
207	207	200	193	186	179	172	165	158	151	144	137	131	124	117	110	103	96	89	82	75	68	62	55	48	41	34	27	20	13	0
208	208	201	194	187	180	173	166	159	152	145	138	131	124	117	110	104	97	90	83	76	69	62	55	48	41	34	27	20	13	0
209	209	202	195	188	181	174	167	160	153	146	139	132	125	118	111	104	97	90	83	76	69	62	55	48	41	34	27	20	13	0
210	210	202	195	189	181	174	168	160	153	147	139	132	126	118	111	105	97	90	84	76	69	63	55	48	42	34	27	21	13	0
211	211	203	196	189	182	175	168	161	154	147	140	133	126	119	112	105	98	91	84	77	70	63	56	49	42	35	28	21	14	0
212	212	204	197	190	183	176	169	162	155	148	141	134	127	120	113	106	98	91	84	77	70	63	56	49	42	35	28	21	14	0
213	213	205	198	191	184	177	170	163	156	149	141	134	127	120	113	106	99	92	85	78	70	63	56	49	42	35	28	21	14	0
214	214	206	199	192	185	178	171	164	156	149	142	135	128	121	114	107	99	92	85	78	71	64	57	49	42	35	28	21	14	0
215	215	207	200	193	186	179	172	164	157	150	143	136	129	121	114	107	100	93	86	78	71	64	57	50	43	35	28	21	14	0
216	216	208	201	194	187	179	172	165	158	151	143	136	129	122	115	108	100	93	86	79	71	64	57	50	43	35	28	21	14	0
217	217	209	202	195	188	180	173	166	159	151	144	137	130	122	115	108	101	94	86	79	72	65	57	50	43	36	28	21	14	0
218	218	210	203	193	188	181	174	167	159	152	145	138	130	123	116	109	101	94	87	79	72	65	58	50	43	36	29	21	14	0
219	219	211	204	197	189	182	175	167	160	153	145	138	131	124	116	109	102	94	87	80	72	65	58	51	43	36	29	21	14	0
220	220	212	205	198	190	183	176	168	161	154	146	139	132	124	117	110	102	95	88	80	73	66	58	51	44	36	29	22	14	0
221	221	213	206	198	191	184	176	169	162	154	147	139	132	125	117	110	103	95	88	81	73	66	58	51	44	36	29	22	14	0
222	222	214	207	199	192	184	177	170	162	155	147	140	133	125	118	111	103	96	88	81	73	66	59	51	44	36	29	22	14	0
223	223	215	208	200	193	185	178	170	163	156	148	141	133	126	118	111	104	96	89	81	74	66	59	52	44	37	29	22	14	0
224	224	216	209	201	194	186	179	171	164	156	149	141	134	126	119	112	104	97	89	82	74	67	59	52	44	37	29	22	14	0
225	225	217	209	202	194	187	180	172	164	157	149	142	135	127	119	112	104	97	90	82	74	67	59	52	45	37	29	22	14	0
226	226	218	210	203	195	188	180	173	165	158	150	143	135	128	120	113	105	97	90	82	75	67	60	52	45	37	30	22	15	0
227	227	219	211	204	196	189	181	174	166	158	151	143	136	128	121	113	105	98	90	83	75	68	60	52	45	37	30	22	15	0
228	228	220	212	205	197	189	182	174	167	159	151	144	136	129	121	114	106	98	91	83	75	68	60	53	45	37	30	22	15	0
229	229	221	213	206	198	190	183	175	167	160	152	145	137	129	122	114	106	99	91	83	76	68	61	53	45	38	30	22	15	0
230	230	222	214	207	199	191	184	176	168	161	153	145	138	130	122	115	107	99	92	84	76	69	61	53	46	38	30	23	15	0
231	231	223	215	207	200																									

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
241	241	232	224	216	208	200	192	184	176	168	160	152	144	136	128	120	112	104	96	88	80	72	64	56	48	40	32	24	16	0
242	242	233	225	217	209	201	193	185	177	169	161	153	145	137	129	121	112	104	96	88	80	72	64	56	48	40	32	24	16	0
243	243	234	226	218	210	202	194	186	178	170	161	153	145	137	129	121	113	105	97	89	80	72	64	56	48	40	32	24	16	0
244	244	235	227	219	211	203	195	187	178	170	162	154	146	138	130	122	113	105	97	89	81	73	65	56	48	40	32	24	16	0
245	245	236	228	220	212	204	196	187	179	171	163	155	147	138	130	122	114	106	98	89	81	73	65	57	49	40	32	24	16	0
246	246	237	229	221	213	204	196	188	180	172	163	155	147	139	131	123	114	106	98	90	81	73	65	57	49	40	32	24	16	0
247	247	238	230	222	214	205	197	189	181	172	164	156	148	139	131	123	115	107	98	90	82	74	65	57	49	41	32	24	16	0
248	248	239	231	223	214	206	198	190	181	173	165	157	148	140	132	124	115	107	99	90	82	74	66	57	49	41	33	24	16	0
249	249	240	232	224	215	207	199	190	182	174	165	157	149	141	132	124	116	107	99	91	82	74	66	58	49	41	33	24	16	0
250	250	241	233	225	216	208	200	191	183	175	166	158	150	141	133	125	116	108	100	91	83	75	66	58	50	41	33	25	16	0
251	251	242	234	225	217	209	200	192	184	175	167	158	150	142	133	125	117	108	100	92	83	75	66	58	50	41	33	25	16	0
252	252	243	235	226	218	209	201	193	184	176	167	159	151	142	134	126	117	109	100	92	83	75	67	58	50	41	33	25	16	0
253	253	244	236	227	219	210	202	193	185	177	168	160	151	143	134	126	118	109	101	92	84	75	67	59	50	42	33	25	16	0
254	254	245	237	228	220	211	203	194	186	177	169	160	152	143	135	127	118	110	101	93	84	76	67	59	50	42	33	25	16	0
255	255	246	237	229	220	212	204	195	186	178	169	161	153	144	135	127	118	110	102	93	84	76	67	59	51	42	33	25	16	0
256	256	247	238	230	221	213	204	196	187	179	170	162	153	145	136	128	119	110	102	93	85	76	68	59	51	42	34	25	17	0
257	257	248	239	231	222	214	205	197	188	179	171	162	154	145	137	128	119	111	102	94	85	77	68	59	51	42	34	25	17	0
258	258	249	240	232	223	214	206	197	189	180	171	163	154	146	137	129	120	111	103	94	85	77	68	60	51	42	34	25	17	0
259	259	250	241	233	224	215	207	198	189	181	172	164	155	146	138	129	120	112	103	94	86	77	69	60	51	43	34	25	17	0
260	260	251	242	234	225	216	208	199	190	182	173	164	156	147	138	130	121	112	104	95	86	78	69	60	52	43	34	26	17	0
261	261	252	243	234	226	217	208	200	191	182	173	165	156	147	139	130	121	113	104	95	86	78	69	60	52	43	34	26	17	0
262	262	253	244	235	227	218	209	200	192	183	174	165	157	148	139	131	122	113	104	96	87	78	69	61	52	43	34	26	17	0
263	263	254	245	236	227	219	210	201	192	184	175	166	157	149	140	131	122	113	105	96	87	78	70	61	52	43	35	26	17	0
264	264	255	246	237	228	219	211	202	193	184	175	167	158	149	140	132	123	114	105	96	87	79	70	61	52	43	35	26	17	0
265	265	256	247	238	229	220	212	203	194	185	176	167	159	150	141	132	123	114	106	97	88	79	70	61	53	44	35	26	17	0
266	266	257	248	239	230	221	212	203	195	186	177	168	159	150	141	133	124	115	106	97	88	79	70	62	53	44	35	26	17	0
267	267	258	249	240	231	222	213	204	195	186	177	169	160	151	142	133	124	115	106	97	88	80	71	62	53	44	35	26	17	0
268	268	259	250	241	232	223	214	205	196	187	178	169	160	151	142	134	125	116	107	98	89	80	71	62	53	44	35	26	17	0
269	269	260	251	242	233	224	215	206	197	188	179	170	161	152	143	134	125	116	107	98	89	80	71	62	53	44	35	26	17	0
270	270	260	251	243	233	224	216	206	197	189	179	170	162	152	143	135	125	116	108	98	89	81	71	62	54	44	35	27	17	0
271	271	261	252	243	234	225	216	207	198	189	180	171	162	153	144	135	126	117	108	99	90	81	72	63	54	45	36	27	18	0
272	272	262	253	244	235	226	217	208	199	190	181	172	163	154	145	136	126	117	108	99	90	81	72	63	54	45	36	27	18	0
273	273	263	254	245	236	227	218	209	200	191	181	172	163	154	145	136	127	118	109	100	90	81	72	63	54	45	36	27	18	0
274	274	264	255	246	237	228	219	210	200	191	182	173	164	155	146	137	127	118	109	100	91	82	73	63	54	45	36	27	18	0
275	275	265	256	247	238	229	220	210	201	192	183	174	165	155	146	137	128	119	110	100	91	82	73	64	55	45	36	27	18	0
276	276	266	257	248	239	229	220	211	202	193	183	174	165	156	147	138	128	119	110	101	91	82	73	64	55	45	36	27	18	0
277	277	267	258	249	240	230	221	212	203	193	184	175	166	156	147	138	129	120	110	101	92	83	73	64	55	46	36	27	18	0
278	278	268	259	250	240	231	222	213	203	194	185	176	166	157	148	139	129	120	111	101	92	83	74	64	55	46	37	27	18	0
279	279	269	260	251	241	232	223	213	204	195	185	176	167	158	148	139	130	120	111	102	92	83	74	65	55	46	37	27	18	0
280	280	270	261	252	242	233	224	214	205	196	186	177	168	158	149	140	130	121	112	102	93	84	74	65	56	46	37	28	18	0
281	281	271	262	252	243	234	224	215	206	196	187	177	168	159	149	140	131	121	112	103	93	84	74	65	56	46	37	28	18	0
282	282	272	263	253	244	234	225	216	206	197	187	178	169	159	150	141	131	122	112	103	93	84	75	65	56	46	37	28	18	0
283	283	273	264	254	245	235	226	216	207	198	188	179	169	160	150	141	132	122	113	103	94	84	75	66	56	47	37	28	18	0
284	284	274	265	255	246	236	227	217	208	198	189	179	170	160	151	142	132	123	113	104	94	85	75	66	56	47	37	28	18	0
285	285	275	265	256	246	237	228	218	208	199	189	180	171	161	151	142	132	123	114	104	94	85	75	66	57	47	37	28	18	0
286	286	276	266	257	247	238	228	219	209	200	190	181	171	162	152	143	133	123	114	104	95	85	76	66	57	47	38	28	19	0
287	287	277	267	258	248	239	229	220	210	200	191	181	172	162	153	143	133	124	114	105	95	86	76	66	57	47	38	28	19	0
288	288	278	268	259	249	239	230	220	211	201	191	182	172	163	153	144	134	124	115	105	95	86	76	67	57	47	38	28	19	0
289	289	279	269	260	250	240	231	221	211	202	192	183	173	163	154	144	134	125	115	105	96	86	77	67	57	48	38	28	19	0
290	290	280	270	261	251	241	232	222	212	203	193	183	174	164																

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/ 31
301	301	290	280	270	260	250	240	230	220	210	200	190	180	170	160	150	140	130	120	110	100	90	80	70	60	50	40	30	20	10
302	302	291	281	271	261	251	241	231	221	211	201	191	181	171	161	151	140	130	120	110	100	90	80	70	60	50	40	30	20	10
303	303	292	282	272	262	252	242	232	222	212	201	191	181	171	161	151	141	131	121	111	100	90	80	70	60	50	40	30	20	10
304	304	293	283	273	263	253	243	233	222	212	202	192	182	172	162	152	141	131	121	111	101	91	81	70	60	50	40	30	20	10
305	305	294	284	274	264	254	244	233	223	213	203	193	183	172	162	152	142	132	122	111	101	91	81	71	61	50	40	30	20	10
306	306	295	285	275	265	254	244	234	224	214	203	193	183	173	163	153	142	132	122	112	101	91	81	71	61	50	40	30	20	10
307	307	296	286	276	266	255	245	235	225	214	204	194	184	173	163	153	143	133	122	112	102	92	81	71	61	51	40	30	20	10
308	308	297	287	277	266	256	246	236	225	215	205	195	184	174	164	154	143	133	123	112	102	92	82	71	61	51	41	30	20	10
309	309	298	288	278	267	257	247	236	226	216	205	195	185	175	164	154	144	133	123	113	102	92	82	72	61	51	41	30	20	10
310	310	299	289	279	268	258	248	237	227	217	206	196	186	175	165	155	144	134	124	113	103	93	82	72	62	51	41	31	20	10
311	311	300	290	279	269	259	248	238	228	217	207	196	186	176	165	155	145	134	124	114	103	93	82	72	62	51	41	31	20	10
312	312	301	291	280	270	259	249	239	228	218	207	197	187	176	166	156	145	135	124	114	103	93	83	72	62	51	41	31	20	10
313	313	302	292	281	271	260	250	239	229	219	208	198	187	177	166	156	146	135	125	114	104	93	83	73	62	52	41	31	20	10
314	314	303	293	282	272	261	251	240	230	219	209	198	188	177	167	157	146	136	125	115	104	94	83	73	62	52	41	31	20	10
315	315	304	293	283	272	262	252	241	230	220	209	199	189	178	167	157	146	136	126	115	104	94	83	73	63	52	41	31	20	10
316	316	305	294	284	273	263	252	242	231	221	210	200	189	179	168	158	147	136	126	115	105	94	84	73	63	52	42	31	21	10
317	317	306	295	285	274	264	253	243	232	221	211	200	190	179	169	158	147	137	126	116	105	95	84	73	63	52	42	31	21	10
318	318	307	296	286	275	264	254	243	233	222	211	201	190	180	169	159	148	137	127	116	105	95	84	74	63	52	42	31	21	10
319	319	308	297	287	276	265	255	244	233	223	212	202	191	180	170	159	148	138	127	116	106	95	85	74	63	53	42	31	21	10
320	320	309	298	288	277	266	256	245	234	224	213	202	192	181	170	160	149	138	128	117	106	96	85	74	64	53	42	32	21	10
321	321	310	299	288	278	267	256	246	235	224	213	203	192	181	171	160	149	139	128	117	106	96	85	74	64	53	42	32	21	10
322	322	311	300	289	279	268	257	246	236	225	214	203	193	182	171	161	150	139	128	118	107	96	85	75	64	53	42	32	21	10
323	323	312	301	290	279	269	258	247	236	226	215	204	193	183	172	161	150	139	129	118	107	96	86	75	64	53	43	32	21	10
324	324	313	302	291	280	269	259	248	237	226	215	205	194	183	172	162	151	140	129	118	107	97	86	75	64	53	43	32	21	10
325	325	314	303	292	281	270	260	249	238	227	216	205	195	184	173	162	151	140	130	119	108	97	86	75	65	54	43	32	21	10
326	326	315	304	293	282	271	260	249	239	228	217	206	195	184	173	163	152	141	130	119	108	97	86	76	65	54	43	32	21	10
327	327	316	305	294	283	272	261	250	239	228	217	207	196	185	174	163	152	141	130	119	108	98	87	76	65	54	43	32	21	10
328	328	317	306	295	284	273	262	251	240	229	218	207	196	185	174	164	153	142	131	120	109	98	87	76	65	54	43	32	21	10
329	329	318	307	296	285	274	263	252	241	230	219	208	197	186	175	164	153	142	131	120	109	98	87	76	65	54	43	32	21	10
330	330	318	307	297	285	274	264	252	241	231	219	208	198	186	175	165	153	142	132	120	109	99	87	76	66	54	43	33	21	10
331	331	319	308	297	286	275	264	253	242	231	220	209	198	187	176	165	154	143	132	121	110	99	88	77	66	55	44	33	22	11
332	332	320	309	298	287	276	265	254	243	232	221	210	199	188	177	166	154	143	132	121	110	99	88	77	66	55	44	33	22	11
333	333	321	310	299	288	277	266	255	244	233	221	210	199	188	177	166	155	144	133	122	110	99	88	77	66	55	44	33	22	11
334	334	322	311	300	289	278	267	256	244	233	222	211	200	189	178	167	155	144	133	122	111	100	89	77	66	55	44	33	22	11
335	335	323	312	301	290	279	268	256	245	234	223	212	201	189	178	167	156	145	134	122	111	100	89	78	67	55	44	33	22	11
336	336	324	313	302	291	279	268	257	246	235	223	212	201	190	179	168	156	145	134	123	111	100	89	78	67	55	44	33	22	11
337	337	325	314	303	292	280	269	258	247	235	224	213	202	190	179	168	157	146	134	123	112	101	89	78	67	56	44	33	22	11
338	338	326	315	304	292	281	270	259	247	236	225	214	202	191	180	169	157	146	135	123	112	101	90	78	67	56	45	33	22	11
339	339	327	316	305	293	282	271	259	248	237	225	214	203	192	180	169	158	146	135	124	112	101	90	79	67	56	45	33	22	11
340	340	328	317	306	294	283	272	260	249	238	226	215	204	192	181	170	158	147	136	124	113	102	90	79	68	56	45	34	22	11
341	341	329	318	306	295	284	272	261	250	238	227	215	204	193	181	170	159	147	136	125	113	102	90	79	68	56	45	34	22	11
342	342	330	319	307	296	284	273	262	250	239	227	216	205	193	182	171	159	148	136	125	113	102	91	79	68	56	45	34	22	11
343	343	331	320	308	297	285	274	262	251	240	228	217	205	194	182	171	160	148	137	125	114	102	91	80	68	57	45	34	22	11
344	344	332	321	309	298	286	275	263	252	240	229	217	206	194	183	172	160	149	137	126	114	103	91	80	68	57	45	34	22	11
345	345	333	321	310	298	287	276	264	252	241	229	218	207	195	183	172	160	149	138	126	114	103	91	80	69	57	45	34	22	11
346	346	334	322	311	299	288	276	265	253	242	230	219	207	196	184	173	161	149	138	126	115	103	92	80	69	57	46	34	23	11
347	347	335	323	312	300	289	277	266	254	242	231	219	208	196	185	173	161	150	138	127	115	104	92	80	69	57	46	34	23	11
348	348	336	324	313	301	289	278	266	255	243	231	220	208	197	185	174	162	150	139	127	115	104	92	81	69	57	46	34	23	11
349	349	337	325	314	302	290	279	267	255	244	232	221	209	197	186	174	162	151	139	127	116	104	93	81	69	5				

106 CMR: DEPARTMENT OF TRANSITIONAL ASSISTANCE

364.990: SNAP Allotment Proration Table

Monthly Allotment	SNAP ALLOTMENT PRORATION TABLE																													
	DAY OF CYCLICAL MONTH - S.L. 667 11/21/1983																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/ 31
361	361	348	336	324	312	300	288	276	264	252	240	228	216	204	192	180	168	156	144	132	120	108	96	84	72	60	48	36	24	12
362	362	349	337	325	313	301	289	277	265	253	241	229	217	205	193	181	168	156	144	132	120	108	96	84	72	60	48	36	24	12
363	363	350	338	326	314	302	290	278	266	254	241	229	217	205	193	181	169	157	145	133	120	108	96	84	72	60	48	36	24	12
364	364	351	339	327	315	303	291	279	266	254	242	230	218	206	194	182	169	157	145	133	121	109	97	84	72	60	48	36	24	12
365	365	352	340	328	316	304	292	279	267	255	243	231	219	206	194	182	170	158	146	133	121	109	97	85	73	60	48	36	24	12
366	366	353	341	329	317	304	292	280	268	256	243	231	219	207	195	183	170	158	146	134	121	109	97	85	73	60	48	36	24	12
367	367	354	342	330	318	305	293	281	269	256	244	232	220	207	195	183	171	159	146	134	122	110	97	85	73	61	48	36	24	12
368	368	355	343	331	318	306	294	282	269	257	245	233	220	208	196	184	171	159	147	134	122	110	98	85	73	61	49	36	24	12
369	369	356	344	332	319	307	295	282	270	258	245	233	221	209	196	184	172	159	147	135	122	110	98	86	73	61	49	36	24	12
370	370	357	345	333	320	308	296	283	271	259	246	234	222	209	197	185	172	160	148	135	123	111	98	86	74	61	49	37	24	12
371	371	358	346	333	321	309	296	284	272	259	247	234	222	210	197	185	173	160	148	136	123	111	98	86	74	61	49	37	24	12
372	372	359	347	334	322	309	297	285	272	260	247	235	223	210	198	186	173	161	148	136	123	111	99	86	74	61	49	37	24	12
373	373	360	348	335	323	310	298	285	273	261	248	236	223	211	198	186	174	161	149	136	124	111	99	87	74	62	49	37	24	12
374	374	361	349	336	324	311	299	286	274	261	249	236	224	211	199	187	174	162	149	137	124	112	99	87	74	62	49	37	24	12
375	375	362	349	337	324	312	300	287	274	262	249	237	225	212	199	187	174	162	150	137	124	112	99	87	75	62	49	37	24	12
376	376	363	350	338	325	313	300	288	275	263	250	238	225	213	200	188	175	162	150	137	125	112	100	87	75	62	50	37	25	12
377	377	364	351	339	326	314	301	289	276	263	251	238	226	213	201	188	175	163	150	138	125	113	100	87	75	62	50	37	25	12
378	378	365	352	340	327	314	302	289	277	264	251	239	226	214	201	189	176	163	151	138	125	113	100	88	75	62	50	37	25	12
379	379	366	353	341	328	315	303	290	277	265	252	240	227	214	202	189	176	164	151	138	126	113	101	88	75	63	50	37	25	12
380	380	367	354	342	329	316	304	291	278	266	253	240	228	215	202	190	177	164	152	139	126	114	101	88	76	63	50	38	25	12
381	381	368	355	342	330	317	304	292	279	266	253	241	228	215	203	190	177	165	152	139	126	114	101	88	76	63	50	38	25	12
382	382	369	356	343	331	318	305	292	280	267	254	241	229	216	203	191	178	165	152	140	127	114	101	89	76	63	50	38	25	12
383	383	370	357	344	331	319	306	293	280	268	255	242	229	217	204	191	178	165	153	140	127	114	102	89	76	63	51	38	25	12
384	384	371	358	345	332	319	307	294	281	268	255	243	230	217	204	192	179	166	153	140	127	115	102	89	76	63	51	38	25	12
385	385	372	359	346	333	320	308	295	282	269	256	243	231	218	205	192	179	166	154	141	128	115	102	89	77	64	51	38	25	12
386	386	373	360	347	334	321	308	295	283	270	257	244	231	218	205	193	180	167	154	141	128	115	102	90	77	64	51	38	25	12
387	387	374	361	348	335	322	309	296	283	270	257	245	232	219	206	193	180	167	154	141	128	116	103	90	77	64	51	38	25	12
388	388	375	362	349	336	323	310	297	284	271	258	245	232	219	206	194	181	168	155	142	129	116	103	90	77	64	51	38	25	12
389	389	376	363	350	337	324	311	298	285	272	259	246	233	220	207	194	181	168	155	142	129	116	103	90	77	64	51	38	25	12
390	390	376	363	351	337	324	312	298	285	273	259	246	234	220	207	195	181	168	156	142	129	117	103	90	78	64	51	39	25	12
391	391	377	364	351	338	325	312	299	286	273	260	247	234	221	208	195	182	169	156	143	130	117	104	91	78	65	52	39	26	13
392	392	378	365	352	339	326	313	300	287	274	261	248	235	222	209	196	182	169	156	143	130	117	104	91	78	65	52	39	26	13
393	393	379	366	353	340	327	314	301	288	275	261	248	235	222	209	196	183	170	157	144	130	117	104	91	78	65	52	39	26	13
394	394	380	367	354	341	328	315	302	288	275	262	249	236	223	210	197	183	170	157	144	131	118	105	91	78	65	52	39	26	13
395	395	391	368	355	342	329	316	302	289	276	263	250	237	223	210	197	184	171	158	144	131	118	105	92	79	65	52	39	26	13
396	396	382	369	356	343	329	316	303	290	277	263	250	237	224	211	198	184	171	158	145	131	118	105	92	79	65	52	39	26	13
397	397	383	370	357	344	330	317	304	291	277	264	251	238	224	211	198	185	172	158	145	132	119	105	92	79	66	52	39	26	13
398	398	384	371	358	344	331	318	305	291	278	265	252	238	225	212	199	185	172	159	145	132	119	106	92	79	66	53	39	26	13
399	399	385	372	359	345	332	319	305	292	279	265	252	239	226	212	199	186	172	159	146	132	119	106	93	79	66	53	39	26	13
400	400	386	373	360	346	333	320	306	293	280	266	253	240	226	213	200	186	173	160	146	133	120	106	93	80	66	53	40	26	13

REGULATORY AUTHORITY

106 CMR 364.000: M.G.L. c. 18, § 10.

(PAGES 757 THROUGH 786 ARE RESERVED FOR FUTURE USE.)