Section: Benefits Issuance WMS/NYC
Page: G-11 Screen: NQCS5C INQUIRY MANUAL

		(2) FS Issuance 11/01/93 Thru 11/07/93 Case # 007008920G Center 073 Unit/Worker 001S1							10/30/9 Page 01 of 01 Reconciliation				
S		Issuance Rdm Dt							Out Tell Vouch				
e Suf			te Cycl				Payment	Payment		DateStatus			
1	Т		Type		Check/At						Апо	unt	Discr
1	01 FS	•	2/93 A FS-ONGNG		22250087 EMRG		337.00	08/0 08/3			/	, /	0
2	01 FS		1/93 A FS-ONGNG		22249140 EMRG		337.00	07/0 07/3			/	,	0
3	01 FS		/93 A FS-ONGON		22248669 EMRG		337.00	06/0 06/3	-		. /	/	0
		/	/				0.00	/	/		/	/	0
		1	/				0.00	/	/		,	,	0

NOCS5C: FS ISSUANCE

To Access This Screen:

- Enter option #3 on the Benefits Issuance History Menu screen (NQCS05).
- Enter either a case # or a case name.
- · Press the ENTER key. The FS Issuance screen (NQCS5C) is displayed.

To Enter Information On This Screen (two options):

Option:

- Enter the number of the selection desired at the bottom of screen NQCS5C.
- Press the ENTER key. The Grant Breakdown screen (NQCS5J) is displayed.

WMS/NYC INQUIRY MANUAL

Screen:

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NQCS5C

To Enter Information On This Screen (continued):

Option:

- Enter a new case number and use the date range displayed, or enter a new date range on the bottom of NQCS5C to view this screen for another case.
- Press the ENTER key. The FS Issuance Screen (NQCS5C) is displayed.

Screen Description:

This screen allows you to view information regarding Food Stamp (FS) benefits issued, both recurring and single issue, for a specified case for a given period of time. The screen presents you with the case number, center and unit/worker ID. For each individual FS issuance on the screen, you will find information on the suffix, date and type of FS issuance, the ATP number, the amount and the time period that the issuance covers and the emergency indicator. Reconciliation information is also given for each issuance.

Refer to pages G-6 through G-8 for definitions.

Refer to page G-7 and G-8 for the Benefit Issuance cycle table based on the toe digit of a case number.