



WASHINGTON MANTAM
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
(ASOƐƐ A ƐHWƐ ASETENA NE AKWAHOSAN DWUMADIE AHOROW)

Da:

Klient Nɔma: _____

Asem No Dwumayeni: _____

Kasa: _____

Dwumadie: _____

Yenni Interim Assistance Reimbursement Authorization (Bere Tiaa mu Mmoa a Wɔde Tua Ka Ho Tumi, IARA) a wode wɔn nsa ahye aseƐ mprempren wɔ yen kyerewtoho mu. Saa tumi krataa yi ma kwan ma wɔtua Washington Mantam no ka wɔ sika mmoa a wo nsa kae no ho se wɔpene wo so se ma SSI a. Ɛse se wode wo nsa hye Interim Assistance Reimbursement Authorization (Bere Tiaa mu Mmoa a Wɔde Tua Ka Ho Tumi, IARA) ase se wobisaa SSI anaase wɔpenee wo so se wobɛnya ABD sika seƐde Washington Administrative Code (Washington Adwumaye Kod, WAC) 388-449-0200 ne 388-449-0210 kyere no.

Se woamfa wo nsa anhye ase na woamfa Assistance Reimbursement Authorization (Mmoa a Wɔde Tua Ka Ho Tumi, IARA) a Ɛka ho no amma ansa na _____, ebia wo sika mmoa begyae ba.

Mesre wo fre me se wowo nsemmissa bi a.

Nea wowo ka:

SSI TIKYANI

Telefon Nɔma: _____

INTERIM ASSISTANCE REIMBURSEMENT
AUTHORIZATION COVER
DSHS 14-503 TW (REV. 01/2022) Twi

Barcode label



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