

BENEFIT

NEW YORK STATE
IDENTIFICATION CARD



ID NUMBER AN33246W CARD NUMBER 600486 8216 2332 465 02

SEX M DOB 05/01/1956


LASTNAME SAUNDERS

FIRST NAME / M.I. KEVIN E

600486
ACCESS NUMBER 8216 2332 465 SEQ# 02

Property of New York State - Must be surrendered on demand

FRAUDULENT USE OF THIS CARD IS A PUNISHABLE OFFENSE

AT 2002 0 8 0044 000 200 001 4


**NOT VALID
WITHOUT
SIGNATURE**

AUTHORIZED SIGNATURE

MEDICAID PROVIDERS

Reimbursement to providers of medical services authorized by New York State electronic verification systems is dependent on verification by MEVS

EBT CLIENTS

For balance information or customer service representative call **1-888-328-6399**
DO NOT WRITE YOUR PIN ON THIS CARD

MEDICAID RECIPIENTS

For answers to Medicaid eligibility questions contact your local Department of Social Services. For other Medicaid questions call **1-800-541-2831**



OTDA-4118 (12/2004)

If this card is found please drop in any mailbox.
RETURN POSTAGE IS GUARANTEED.
RETURN TO:
P.O. BOX 859, ALBANY, N.Y. 12201-0859