State Template – FFCRA SNAP Emergency Allotment Request

States must provide the following to their FNS Regional SNAP contact(s) for each month covered by this request.

State/Territory: Illinois	
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1.	December] EA Issuance date	(s`):

Regular Availability Date	Availability Date for EA
<u>12/1/2021</u> Case Numbers starting 1-4	12/21/2021
<u>12/1/2021</u> Case Numbers starting 5-9	12/22/2021
<u>12/02/2021</u> <u>12/03/2021</u>	12/23/2021
<u>12/4/2021</u>	12/24/2021
<u>12/05/2021</u> <u>12/06/2021</u>	12/25/2021
<u>12/7/2021</u>	12/26/2021
<u>12/8/2021</u> 12/9/2021	12/27/2021
<u>12/10/2021</u>	12/28/2021
12/13/2021, 12/17/2021, 12/20/2021	12/29/2021

(Provide exact dates of planned EA issuance for the month or annotate above if the State will be providing EA benefits in accordance with the State's regular issuance schedule.)

**Weekly batch will start week of __01/03/2022____ to identify and issue any [December] SNAP benefits that were approved after the initial run date for that regular availability date.

2.	[December] estimate of the number of households and estimated EA amount:		
	Number of households receiving emergency allotment benefits:	988,522	
	Amount of emergency allotment benefits issued per month:		
	\$_158,623,237.00		

- 3. **Confirmation** that one or more of the following conditions exists due to COVID-19. (Check all that apply):
 - ⊠ Residents of the State are confirmed to have contracted COVID-19
 - ⊠ Some or all areas of the State are containment or quarantine zones
 - ☐ Businesses have closed or significantly reduced their hours
 - ☑ The State's residents have experienced economic impacts due to job suspensions or losses
 - ☑ The State's residents have been directed to practice social distancing

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☑ The State's emergency or disaster declaration remains active

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funding.