



WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

February 20, 2013

ALL COUNTY INFORMATION NOTICE NO. I-07-13

TO: ALL COUNTY WELFARE DIRECTORS
ALL EBT PROJECT MANAGERS
ALL CALFRESH COORDINATORS
ALL CALFRESH PROGRAM SPECIALISTS

REASON FOR THIS
TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

SUBJECT: NEW ELECTRONIC BENEFIT TRANSFER (EBT) POSTERS FOR
CALFRESH AUTHORIZED RETAILERS AND FARMERS' MARKETS

The purpose of this notice is to announce that the California Department of Social Services (CDSS) has developed new posters for CalFresh authorized retailers and farmers' markets to promote their acceptance of EBT.

CDSS has developed new colorful signage that promotes healthy eating and can be prominently displayed by retailers located in your area that accept EBT. The new posters create uniformity with regards to EBT and CalFresh logos and language. Attached is a smaller copy of the new EBT posters, one for retailers and two for farmers' markets. All EBT posters are double sided and laminated with English on one side and Spanish on the reverse side.

CDSS will be providing the new EBT posters (PUB 403A and PUB 403B) directly to farmers' markets. However, if you receive a request for a PUB 403A or PUB 403B poster, please direct them to Dianne Padilla-Bates, EBT and Welfare Technology Unit, at (916) 654-1396 or via email at Dianne.Padilla-Bates@dss.ca.gov and she will provide a poster to the farmers' market.

EBT authorized retailers may request a poster by:

- Sending an e-mail to the EBT Project website:
www.ebtproject.ca.gov/ContactUs.shtml
- Contacting counties directly by phone or mail
- Visiting the local county office
- Downloading a printable version at the EBT Project website:
www.ebtproject.ca.gov/CommercialInformation/poster.shtml

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All requests for EBT posters from the EBT website will be forwarded to the CalFresh coordinator of the appropriate county. The county will be responsible for providing a poster(s) to the requestor.

Counties can request retailer posters from the CDSS warehouse:

- CDSS warehouse website: www.dss.cahwnet.gov/cdssweb/PG98.htm
- Use the GEN 727B form (see attached)
- Request PUB 403 for either the 29x19 or 8.5x14 inch posters

If ordering the new posters to have a supply on hand at your county office, please limit these orders to a minimum. However, you may order on an as needed basis for each of your retailers' requests.

If you have any questions regarding this letter, please contact Daniel Brown, EBT and Welfare Technology Unit, at (916) 651-0674 or via email at Daniel.Brown@dss.ca.gov.

Sincerely,

Original Document Signed By:

MARIA HERNANDEZ, Chief
Program Integrity Branch

Attachments

We accept EBT



CalFresh will stretch your food dollars. You can buy more fruit, vegetables, and other healthy foods for the whole family.

For more information on how to use your EBT card benefits, visit www.calfresh.ca.gov.



Funded by USDA SNAP, known in California as CalFresh, an equal opportunity provider and employer. California Department of Social Services and California Department of Public Health

Aceptamos EBT



CalFresh ayuda a que rinda más su presupuesto de comida. Puede comprar más frutas, verduras y otros alimentos saludables para toda la familia.

Para más información sobre cómo usar los beneficios de su tarjeta EBT, visite www.calfresh.ca.gov o llame al 1-888-9-COMIDA.



Adaptado del USDA



Financiado por SNAP del USDA, conocido en California como CalFresh, un proveedor y empleador que ofrece oportunidades equitativas. Departamento de Servicios Sociales de California y Departamento de Salud Pública de California

We accept

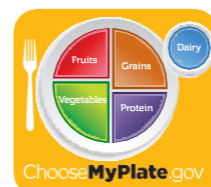


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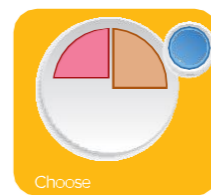


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SUBMIT

Reset Form

COUNTY FORMS ORDER
(Instructions on Reverse)

TO: CDSS Warehouse, 3705 Seaport Blvd #140, West Sacramento, CA 95691

FOR:

COUNTY CODE	PERSON TO CONTACT	DATE	ADDRESS	STREET ADDRESS AND ROOM NUMBER
TELEPHONE NUMBER ()	AUTHORIZING SIGNATURE		CITY STATE ZIP	CITY STATE ZIP

BILL TO:	SHIP TO:
AGENCY	AGENCY, OFFICE OR SECTION
ADDRESS	STREET ADDRESS AND ROOM NUMBER
CITY STATE ZIP	CITY STATE ZIP

LINE	FORM CATALOG NUMBER			TITLE OR CATALOG DESCRIPTION	QUANTITY WANTED	UNIT OF ISSUE	PRICE PER UNIT OF ISSUE	PRICE PER FORM ORDER	PROCESS CODE (Over)	TYPE OF ORDER	
	PREFIX	NUMBER	SUFFIX							<input type="checkbox"/> REGULAR	<input type="checkbox"/> EMERGENCY
1											DATE RECEIVED
2											FILLED BY: DATE:
3											PACKED BY: DATE:
4											PRICES WEIGHT:
5											VIA B/L
6											DATE: BY:
7											REMARKS
8											
9											
10											
11											

TOTAL ORDER: \$	ADJUSTED ORDER: \$
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INSTRUCTIONS

1. Use this order for forms listed in the county forms catalog.
2. Print clearly or type in duplicate.
3. Complete all spaces except shaded areas.
4. List forms in forms catalog sequence.
5. **FREE/SOLD** forms and numbered publication can be on the same order.
6. Make separate line entries (white area) for each form ordered.
7. Route original to the Social Services Warehouse. Retain one for a suspense copy.
 - A. Original, warehouse file.
 - B. Suspense Copy.

PROCESS CODE LEGEND

Action taken by the warehouse will be found in the process code column on the front of this order. The following codes explain the action taken on your order.

- A—Cancelled, an all office shipment pending.
- B—Back ordered, will be shipped when available.
- C—Cancelled, item not furnished.
- D—Cannot identify, check forms catalog for form number, or send sample.
- G—Quantity reduced, amount requested appears excessive, please reanalyze usage of this item.
- I—Quantity changed due to packaging.
- K—Quantity reduced; Stock low—reorder when needed. L—Form Obsolete.
- R— _____
- _____
- _____
- _____
- _____
- _____
- _____

SAMPLE ENTRY

PREFIX	NUMBER	SUFFIX	TITLE OR CATALOG DESCRIPTION	QUANTITY OF ISSUE	UNIT OF ISSUE
ABCD	239	A	NOTICE OF PROPOSED ACTION	10	
DFA	285.1	SPAN	INCOME FROM FARM OPER. AND OTHER SELF-EMPL.	5	