

NOTICE OF FORM CHANGE NO. 06-058

DATE

05/10/2006

TO:
County Welfare Director
Supply Clerk / Forms Coordinator

FROM:
Forms Management Unit
(916) 657-1907

Community Care Licensing District Offices
 Private and Public Adoption Agencies

District Attorney
 Other

Listed below is information regarding a form change. Only applicable information is shown.

This notice updates your Department of Social Services County Forms Catalog.

FORM NUMBER AND TITLE PUB 13 - Your Rights Under California Welfare Programs (Large Print also)

ORDER UNIT EACH	<input checked="" type="checkbox"/> Free <input type="checkbox"/> Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	DATE OF FORM 11/05	REPLACES 1/04	<input type="checkbox"/> Obsolete
REQUIRED FORM- <input checked="" type="checkbox"/> No Change Permitted	REQUIRED FORM- <input type="checkbox"/> Substitute Permitted With Prior DSS Approval	<input type="checkbox"/> Recommended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		<input type="checkbox"/> Other:	

FORMS DISPOSITION AND SPECIAL INSTRUCTIONS

DISPOSITION OF OLD SUPPLY

Use until exhausted Destroy

USE NEW FORM

When supply available in DSS Warehouse Use new form effective 11/05

USE FORM IN ACCORDANCE WITH

All County Letter No.
 Other (specify)

ADDITIONAL INFORMATION REGARDING FORM CHANGE

Attached are Reproducible Copies of each.

PUB 13 (Pamphlet) is printed 8 1/2 x 14.

PUB 13 (large print) is printed 8 1/2 x 11.

Check on the internet to see if forms are available at www.dss.cahwnet.gov

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 445-6778 or by electronic mail at LTS@dss.ca.gov.

AT THE HEARING

If you have notified the State Hearings Division before your hearing that you need language services, a state-approved interpreter will be present at your hearing to assist you and the other participants. You should be prepared to present your best case at the hearing. You will have an opportunity to tell the Administrative Law Judge why you disagree with the county's action and the county representative will have an opportunity to explain why the action was taken. It is up to the county to prove that its action is correct. You and the county representative may question each other and any witnesses who are present. The Administrative Law Judge may also ask questions to bring out all the facts.

State law requires that all hearings are to be tape recorded. The recording is for use in making the decision and is kept in case there is a dispute about the decision.

THE DECISION

After the hearing is completed, the Administrative Law Judge will either send a proposed decision to the Director of the California Department of Social Services or Health Services or will issue a final decision on behalf of the Director. If a proposed decision is sent to the Director, the facts presented during the hearing will be studied and the Director will either adopt the proposed decision, order a further hearing, or issue his/her own decision. If the Director issues his/her own decision, that decision is binding, but you will also receive a copy of the Administrative Law Judge's original proposed decision. Immediately upon receipt of a decision, the county must comply with the decision even if a rehearing is requested. If the decision is a denial, any aid pending which you had been receiving will stop. In addition, the county can demand repayment of excess cash aid or food stamps which were paid as aid pending. If you disagree with the decision, you may request a rehearing by following the instructions on the first page of the State Hearing decision you receive.

If you disagree after receiving either a decision or a rehearing decision, you can seek judicial review by appealing to Superior Court. The request for judicial review must be filed with the court within one year after receiving notice of the Director's final decision.

WITHDRAWING FROM A STATE HEARING

You may withdraw (cancel) your request for a State Hearing any time before the Director has issued a decision by sending a written request to the State Hearings Division in Sacramento. If you withdraw before the hearing, it will be cancelled. If you withdraw after the hearing, no decision will be issued. In both cases, the county's action will take effect. If you received aid at a level greater than you should have received if you had not requested the hearing, and you later withdraw before the decision is issued, the county has a right to demand repayment of the overpaid amount of cash aid or food stamps. The result is the same as a written decision supporting the county's action.

RECORDS ARE IMPORTANT

Every hearing is different. The Administrative Law Judge will want to see papers or records which give facts and provide verification regarding your case. You should bring to the hearing records that will prove or disprove a fact upon which you and the county disagree. Records relating to the specific disputed matter are often required to correctly resolve a case. Examples are:

- Records relating to real property, such as tax receipts, deeds, contracts and mortgages.
- Records relating to personal property, such as bank books, insurance policies, automobile ownership papers, stocks, bonds, notes and contracts.
- Records relating to disability, such as medical reports, hospital records, or doctor's notes.
- Records regarding money you receive, such as: wage stubs; award letters showing how much you receive from Social Security; Unemployment Insurance; Veterans Benefits; court-ordered support payments; student financial aids; from property rental; boarders; roomers; stocks; bonds; or payments made on your behalf, including gifts, etc.
- Bills and receipts showing the amount you are paying for housing, utilities (including telephone), medical care (including health insurance and medical transportation), union dues, attendant and child care, school tuition and fees, disaster and casualty losses.

Discrimination

Under State law, welfare agencies may not, on the basis of race, color, national origin, age, disability, religion, sex, political affiliation or marital status, provide aid, benefits or services to an individual or group which is different from that provided to others. Federal laws also prohibit discrimination on several, although not all, of the bases listed above.

Federal law prohibits: (1) delaying or denying the placement of a child for adoption or into foster care on the basis of the race, color or national origin of the adoptive or foster parent, or the child involved; (2) denying to any individual the opportunity to become a foster or adoptive parent on the basis of the race, color or national origin of the individual or child involved.

If you believe you have been discriminated against by the welfare agency, you may take any of the following actions:

1. Speak to the County Welfare Department's Civil Rights Representative. The county will investigate the complaint and inform you of the outcome.
2. You may file a discrimination complaint with CDSS by e-mail, writing or calling:
California Department of Social Services
Civil Rights Bureau (CRB)
P.O. Box 944243, M.S. 15-70
Sacramento, CA 94244-2430
Call (916) 654-2107 or toll free 1-866-741-6241
E-Mail: crb@dss.ca.gov
TDD/TTY Users may call direct at (916) 654-2098 or collect by calling (800) 688-4486 or you may call via the California Relay Service operator at (800) 735-2929.
3. If your complaint involves the Food Stamp Program, you may file a federal discrimination complaint with:

USDA , Director
Office for Civil Rights
Room 326-W, Whitten Building
14th and Independence Avenue, SW
Washington, D.C. 20250-9410
1-800-795-3272 (voice)
(TTY) 202-720-6382

4. If your complaint involves assistance programs other than Food Stamps, and if you believe that the alleged discriminatory action was based on race, color, national origin, age, or disability, you may file a federal discrimination complaint with:

U.S. Department of Health and Human Services
Office for Civil Rights
50 United Nations Plaza, Room 322
San Francisco, CA 94102
1-800-368-1019

A complaint must be filed within 180 days of the occurrence of the alleged discrimination. In your complaint, state the basis of discrimination (e.g., race, disability, sex), what happened, why you believe that the action was taken, and the resolution you are seeking.

If you disagree with the county's decision on your discrimination complaint, you may appeal the finding to the California Department of Social Services or, if it involves the Food Stamp program, to the U.S. Department of Agriculture. **THE DISCRIMINATION COMPLAINT PROCESS DIFFERS FROM THE STATE HEARING PROCESS. YOU HAVE THE RIGHT TO REQUEST A STATE HEARING IF YOU BELIEVE THAT THE COUNTY MADE AN INCORRECT DECISION ON YOUR BENEFITS IN ADDITION TO FILING A DISCRIMINATION COMPLAINT.**

In Conclusion

If you have any question about the information in this paper—your rights or what you should do if you think your rights have been violated—ask someone in your county welfare department or talk with someone at Public Inquiry and Response, California Department of Social Services.

Also, it may be helpful to obtain written information which explains the public assistance for which you are applying or receiving. It is available at your county welfare department. If a leaflet about the program is not offered to you, ask for it. **One way to ensure that you are treated fairly is to know what you are entitled to receive.**



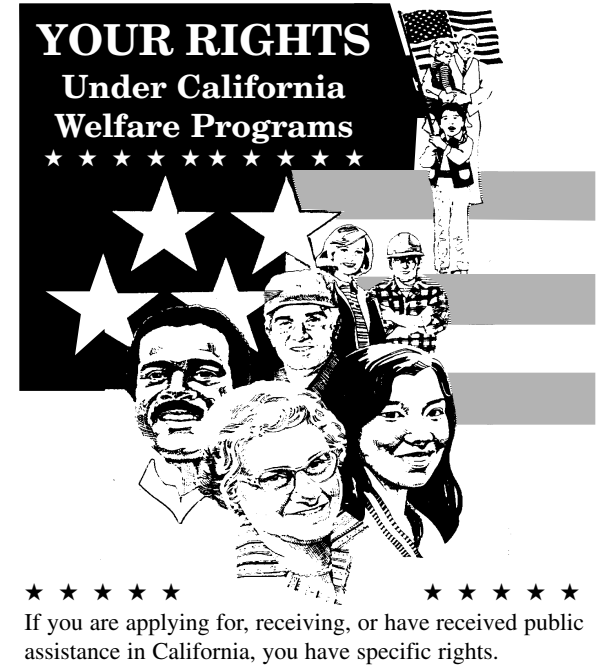
STATE OF CALIFORNIA
Arnold Schwarzenegger, Governor

HEALTH AND HUMAN SERVICES AGENCY
Kimberly Belshé, Secretary

DEPARTMENT OF SOCIAL SERVICES

This publication is available in large print and also on audio tape upon request from your county.

You should tell the county if you have a disability and need help applying for or continuing to receive aid, benefits, and services.



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If you are applying for, receiving, or have received public assistance in California, you have specific rights.

This brochure describes your rights and explains what you can do if you have a complaint. The information is for persons applying for, receiving, or who have received aid or services in any of the following assistance programs:

- Adoption Assistance Program (AAP)**
- Alcohol and Drug Program**
- California Food Assistance Program (CFAP)**
- California Medical Assistance (Medi-Cal)**
- California Work Opportunity and Responsibility to Kids (CalWORKs)**
- CalWORKs Child Care**
- CalWORKs Welfare to Work Program**
- Cash Assistance Program for Immigrants (CAPI)**
- Child Welfare Services**
- Denti-Cal**
- Early & Periodic Screening, Diagnosis, and Treatment (EPSDT)**
- Food Stamps**
- Foster Care**
- In-Home Supportive Services (IHSS)**
- Kinship Guardian Assistance Payment (Kin-GAP)**
- Mental Health**
- Multipurpose Senior Service Program (MSSP)**
- Personal Care Services Program (PCSP)**
- Refugee Cash Assistance**
- Social Services**

If you have a complaint concerning a grant issued by the county (general assistance/general relief), you must file a request with the county in order to get your complaint resolved.

If you have a complaint concerning the Supplemental Security Income/State Supplementary Program, you must discuss the problem with someone at the Social Security Administration Office nearest your home. The Social Security Administration handles complaints and conducts hearings in the aid programs for aged, blind and disabled persons.

Multi-Lingual Services

If you or someone you know has problems applying for or receiving public assistance because you or that person do not speak English, ask for help from someone who speaks your language. You have a right to interpreter services provided by the county. If your county welfare office does not have an employee with whom you can talk, call 1-800-952-5253 for help. You will not have to pay for the call.

Your Rights

As a person applying for or receiving public assistance in California, you have the right:

- ★ **To receive a written explanation of the decision on your application.**
- ★ **To receive a written explanation when any change is made in your eligibility, benefits or services plan.**
- ★ **To appeal any decision on your eligibility, benefits or service plan.**
- ★ **To see any information related to your eligibility which you provide to the county. You may inspect your entire case record if you request a State Hearing (see the “What You Can Do” section of this brochure).**
- ★ **To file a complaint when you believe you have been discriminated against because of race, color, religion, sex, national origin, political affiliation, disability, marital status or age.**
- ★ **To be treated with courtesy, consideration and respect.**
- ★ **To be given the same consideration and treatment as all other applicants or recipients regardless of race, color, religion, sex, national origin, political affiliation, disability, marital status or age.**
- ★ **To have the information in your case record kept confidential except as otherwise stated by State and federal law.**
- ★ **To have personal privacy. However, certain personal information is required to determine your eligibility and need for public assistance.**

When applying for or receiving public assistance, your rights must be respected by all persons and organizations, including county welfare departments, boarding homes and institutions, day nurseries, work or training program personnel, hospitals, nursing homes, doctors, dentists and druggists.



A Telecommunication Device for the Deaf (TDD) is available at the California Department of Social Services (CDSS). If you have a complaint about public assistance services, you may contact us using a TDD by calling toll free 1-800-952-8349.

What You Can Do

If you don't agree with an action on your application, public assistance benefits or service plan, you can do any or all of the things listed below.

1. Talk with someone at your county welfare department. Explain why you disagree and ask for help.
2. File a formal complaint against the county with the California Department of Social Services. To do so, call toll free or write:
Public Inquiry and Response
P.O. Box 944243, M.S. 6-23
Sacramento, California 94244-2430
Phone 1-800-952-5253 (Voice)
1-800-952-8349 (TDD)
FAX 1-916-229-4110
3. Request a State Hearing before an Administrative Law Judge.
YOU MUST MAKE YOUR REQUEST FOR THE STATE HEARING WITHIN 90 DAYS (NOT THREE MONTHS) OF THE COUNTY'S ACTION. The 90-day period applies even though you have filed a complaint. The 90-day period begins to run when the county mails you a notice of action.

If you decide to request a State Hearing because your aid is going to be reduced or stopped, **you may continue to receive the same aid you have been getting until the hearing, if you make your request for hearing before the effective date of the action. Your food stamps can continue unchanged only until the end of your current certification period. If the hearing decision is not in your favor, an overpayment may occur in the amount of excess cash aid and extra value of food stamps you received while the hearing was pending.**

Also, it is a good idea to save the envelope from the Notice of Action to show to the Administrative Law Judge. The date is important.

To make a request for a State Hearing, fill in the “Request for State Hearing” space on the back of the Notice of Action form. If you have trouble understanding English, tell us your language and dialect. You may write a letter which explains the county action which you believe was incorrect and your need for language help. Send your hearing request to the county welfare department at the address indicated on the Notice of Action.

A request for a State Hearing may also be made orally. This can be done by telephoning the toll free number at 1-800-952-5253 or if you are hearing impaired call 1-800-952-8349 (TDD).

State Hearings

This is a hearing with you, an Administrative Law Judge from the California Department of Social Services, and a representative of the county. It is not a court hearing. You may, if you wish, have a lawyer or other representative present with you at your cost. You may bring witnesses. The Administrative Law Judge is in charge of the hearing, which is not open to the public.

TIME AND PLACE OF HEARING

At least 10 days before your hearing, the California Department of Social Services will send you a letter with the exact date and place of the hearing. In some counties, you will also be told an exact time for the hearing. In other counties, you will be scheduled for either a morning or afternoon time slot. Most hearings will begin at either 8:30 a.m. or 1:00 p.m. Because several hearings will be scheduled to begin at these times, you should anticipate that there may be some delay before your hearing actually starts. There is no child care provided at the hearing location.

Hearings are usually held at public buildings in the county. If you are unable to attend the hearing at the hearing location for reasons of poor health or disability, the hearing may be held in your home, in another agreed upon location, or by telephone with your agreement. To have a home hearing, medical verification may be required. If you believe you may qualify for a home hearing or wish to have a telephone hearing, call or write the State Hearings Division to explain your reason(s):

State Hearings Division
P.O. Box 944243 MS 19-37
Sacramento, CA 94244-2430
1-800-743-8525

If you move after requesting a State Hearing but before it is heard or a decision issued, you should notify the State Hearings Division of your new address by calling toll free 1-800-743-8525 (Voice/TDD).

If you are no longer a resident of the State of California, arrangements will be made to conduct your hearing by telephone. Instructions concerning telephone hearing procedures will be sent to you in advance of the hearing.

POSITION STATEMENTS

You are allowed to have a copy of the county's typewritten Position Statement before the hearing. This is a typewritten statement which explains what the county has done and the reasons for the county action. You may pick up this statement any time during business hours in the two working days before your date of hearing unless the county is not involved with the hearing. You may call your county appeals unit to make sure that these papers are ready.

If the papers are not ready, or if the county substantially changes the papers after giving them to you, you have the right to have the hearing postponed for good cause. This means that your hearing will be rescheduled and any aid pending the hearing will be continued. You may pick up the statement from the Appeals Worker at the County Welfare Department.

At the hearing you also may submit a written statement explaining your position on the issue to be considered by the Administrative Law Judge. Both the county's Position Statement and your written statement will become part of the hearing record and will be reviewed by the Administrative Law Judge.

POSTPONEMENTS

If you want to postpone the hearing and your hearing involves the Food Stamp program, you may request and will receive an automatic first postponement. In any other case in which you wish to receive a postponement, you must notify the state prior to the hearing and present a good reason for the postponement. Send a written request to the State Hearings Division or call toll free at 1-800-743-8525 (Voice/TDD).

If you do not appear at a scheduled hearing and still want a hearing, you must request that the hearing be reopened within 10 days from the date of the scheduled hearing and show a good reason why you did not attend your scheduled hearing.

BEFORE THE HEARING

You must either attend the hearing yourself or authorize someone to appear for you. If you plan to have someone appear for you, send the name, address and telephone number of your representative to the State Hearings Division before your scheduled hearing date. You may obtain a list of legal services representatives, voluntary legal service persons, or welfare rights organizations from the county. You must also sign a written statement authorizing your representative to appear on your behalf. This statement should be sent to the county and to the State Hearings Division.

You may go to the hearing with your representative and you may ask others who know the facts to be present at the hearing to tell the Administrative Law Judge what they know about the case. If you want to have a person or papers important to your case at your hearing, you may request that a subpoena be issued. To request a subpoena **before** the date of the hearing, write or call the office listed below which is closest to you:

State Hearings Division
P.O. Box 944243
M.S. 19-44
Sacramento, CA 94244-2430
Phone (916) 229-4187

State Hearings Division
Bay Area Regional Office
1515 Clay Street, #1203
Oakland, CA 94612
Phone (510) 622-4000

State Hearings Division
811 Wilshire Boulevard,
Suite 1118
Los Angeles, CA 90017
Phone (213) 833-2200

State Hearings Division
355 West Grand Ave.,
Suite 4
Escondido, CA 92025-2649
Phone (760) 735-5070

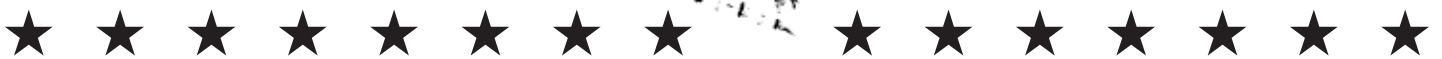
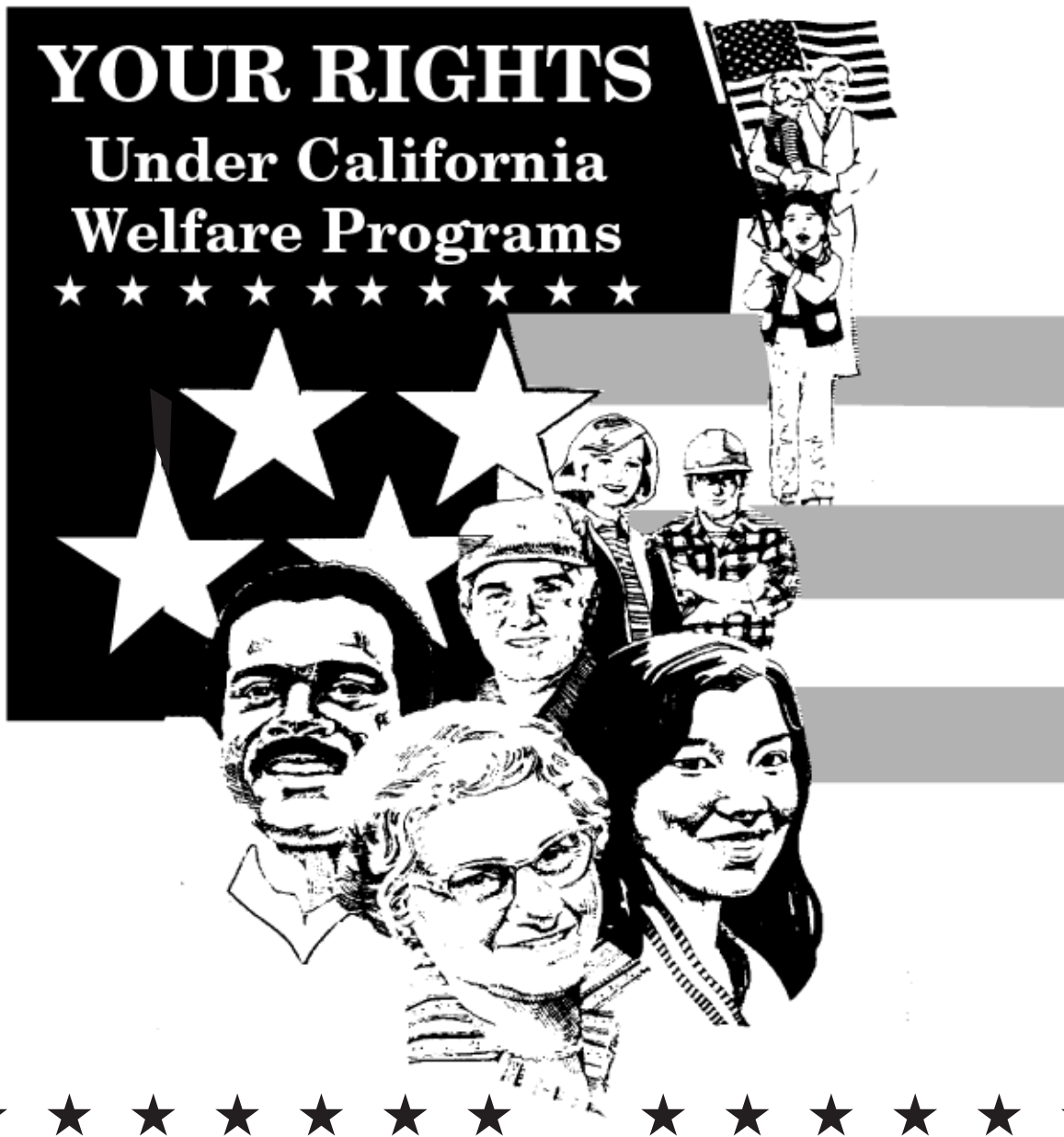
State Hearings Division
2550 Mariposa Mall,
#3088
Fresno, CA 93721
Phone (559) 445-5775

Tell us the name of the person or describe the documents you want subpoenaed, and tell why they are important to your hearing. The Presiding Administrative Law Judge will determine if a subpoena should be issued. It will be your responsibility to serve the person you want subpoenaed, or the custodian of the records if you want to obtain a document.

You have a right to look at your case records and the regulations before the hearing. Call your county appeals unit to arrange this review.

YOUR RIGHTS

Under California Welfare Programs



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If you or someone you know has problems applying for or receiving public assistance because you or that person do not speak English, ask for help from someone who speaks your language. You have a right to interpreter services provided by the county. If your county welfare office does not have an employee with whom you can talk, call 1-800-952-5253 for help. You will not have to pay for the call.

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- ★ **To receive a written explanation of the decision on your application.**
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- ★ **To appeal any decision on your eligibility, benefits or service plan.**
- ★ **To see any information related to your eligibility which you provide to the county. You may inspect your entire case record if you request a State Hearing (see the “What You Can Do” section of this brochure).**
- ★ **To file a complaint when you believe you have been discriminated against because of race, color, religion, sex, national origin, political affiliation, disability, marital status or age.**
- ★ **To be treated with courtesy, consideration and respect.**
- ★ **To be given the same consideration and treatment as all other applicants or recipients**

regardless of race, color, religion, sex, national origin, political affiliation, disability, marital status or age.

- ★ **To have the information in your case record kept confidential except as otherwise stated by State and federal law.**
- ★ **To have personal privacy. However, certain personal information is required to determine your eligibility and need for public assistance.**

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Sacramento, California 94244-2430

Phone 1-800-952-5253 (Voice)

1-800-952-8349 (TDD)

FAX 1-916-229-4110

State that you want your problem to be handled as a “complaint” and give the reason for the complaint. Social Services will notify the county welfare department of the complaint, and the

county will review the facts in your case. If the county determines that you are entitled to an adjustment, your complaint may be settled without further action on your part or on the part of Social Services.

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P.O. Box 944243
M.S. 19-44
Sacramento, CA 94244-2430
Phone (916) 229-4187**

**State Hearings Division
Bay Area Regional Office
1515 Clay Street, #1203
Oakland, CA 94612
Phone (510) 622-4000**

**State Hearings Division
811 Wilshire Boulevard,
Suite 1118
Los Angeles, CA 90017
Phone (213) 833-2200**

**State Hearings Division
355 West Grand Ave.,
Suite 4
Escondido, CA 92025-2649
Phone (760) 735-5070**

**State Hearings Division
2550 Mariposa Mall,
#3088
Fresno, CA 93721
Phone (559) 445-5775**

Tell us the name of the person or describe the documents you want subpoenaed, and tell why they are important to your hearing. The Presiding Administrative Law Judge will determine if a subpoena should be issued. It will be your responsibility to serve the person you want subpoenaed, or the custodian of the records if you want to obtain a document.

You have a right to look at your case records and the regulations before the hearing. Call your county appeals unit to arrange this review.

AT THE HEARING

If you have notified the State Hearings Division before your hearing that you need language services, a state-approved interpreter will be present at your hearing to assist you and the other participants. You should be prepared to present your best case at the hearing. You will have an opportunity to tell the Administrative Law Judge why you disagree with the county's action and the county representative will have an opportunity to explain why the action was taken. It is up to the county to prove that its action is correct. You and the county representative may question each other and any witnesses who are present. The Administrative Law Judge may also ask questions to bring out all the facts. State law requires that all hearings are to be tape recorded. The recording is for use in making the decision and is kept in case there is a dispute about the decision.

THE DECISION

After the hearing is completed, the Administrative Law Judge will either send a proposed decision to the Director of the California Department of Social Services or Health Services or will issue a final decision on behalf of the Director. If a proposed decision is sent to the Director, the facts presented during the hearing will be studied and the Director will either adopt the proposed decision, order a further hearing, or issue his/her own decision. If the Director issues his/her own decision, that decision is binding, but you will also receive a copy of the Administrative Law Judge's original proposed decision. Immediately upon receipt of a decision, the county must comply with the decision even if a rehearing is requested. If the decision is a denial, any aid pending which you had been receiving will stop. In addition, the county can demand repayment of excess cash aid or food stamps which were paid as aid pending. If you disagree with the decision, you may request a rehearing by following the instructions on the first page of the State Hearing decision you receive.

If you disagree after receiving either a decision or a rehearing decision, you can seek judicial review by appealing to Superior Court. The request for judicial

review must be filed with the court within one year after receiving notice of the Director's final decision.

WITHDRAWING FROM A STATE HEARING

You may withdraw (cancel) your request for a State Hearing any time before the Director has issued a decision by sending a written request to the State Hearings Division in Sacramento. If you withdraw before the hearing, it will be cancelled. If you withdraw after the hearing, no decision will be issued. In both cases, the county's action will take effect. If you received aid at a level greater than you should have received if you had not requested the hearing, and you later withdraw before the decision is issued, the county has a right to demand repayment of the overpaid amount of cash aid or food stamps. The result is the same as a written decision supporting the county's action.

RECORDS ARE IMPORTANT

Every hearing is different. The Administrative Law Judge will want to see papers or records which give facts and provide verification regarding your case. You

should bring to the hearing records that will prove or disprove a fact upon which you and the county disagree. Records relating to the specific disputed matter are often required to correctly resolve a case. Examples are:

- Records relating to real property, such as tax receipts, deeds, contracts and mortgages.
- Records relating to personal property, such as bank books, insurance policies, automobile ownership papers, stocks, bonds, notes and contracts.
- Records relating to disability, such as medical reports, hospital records, or doctor's notes.
- Records regarding money you receive, such as: wage stubs; award letters showing how much you receive from Social Security; Unemployment Insurance; Veterans Benefits; court-ordered support payments; student financial aids; from property rental; boarders; roomers; stocks; bonds; or payments made on your behalf, including gifts, etc.
- Bills and receipts showing the amount you are paying for housing, utilities (including telephone), medical care (including health insurance and medical transportation), union dues, attendant and child care, school tuition and fees, disaster and casualty losses.

Discrimination

Under State law, welfare agencies may not, on the basis of race, color, national origin, age, disability, religion, sex, political affiliation or marital status, provide aid, benefits or services to an individual or group which is different from that provided to others. Federal laws also prohibit discrimination on several, although not all, of the bases listed above.

Federal law prohibits: (1) delaying or denying the placement of a child for adoption or into foster care on the basis of the race, color or national origin of the adoptive or foster parent, or the child involved; (2) denying to any individual the opportunity to become a foster or adoptive parent on the basis of the race, color or national origin of the individual or child involved.

If you believe you have been discriminated against by the welfare agency, you may take any of the following actions:

1. Speak to the County Welfare Department's Civil Rights Representative. The county will investigate the complaint and inform you of the outcome.

2. You may file a discrimination complaint with CDSS by e-mail, writing or calling:
California Department of Social Services
Civil Rights Bureau (CRB)
P.O. Box 944243, M.S. 15-70
Sacramento, CA 94244-2430
Call (916) 654-2107 or toll free 1-866-741-6241
E-Mail: crb@dss.ca.gov
TDD/TTY Users may call direct at (916) 654-2098 or collect by calling (800) 688-4486 or you may call via the California Relay Service operator at (800) 735-2929.
3. If your complaint involves the Food Stamp Program, you may file a federal discrimination complaint with:
USDA , Director
Office for Civil Rights
Room 326-W, Whitten Building
14th and Independence Avenue, SW
Washington, D.C. 20250-9410
1-800-795-3272 (voice) (TTY) 202-720-6382
4. If your complaint involves assistance programs other than Food Stamps, and if you believe that the alleged discriminatory action was based on race,

color, national origin, age, or disability, you may file a federal discrimination complaint with:

U.S. Department of Health and Human Services
Office for Civil Rights

50 United Nations Plaza, Room 322

San Francisco, CA 94102

1-800-368-1019

A complaint must be filed within 180 days of the occurrence of the alleged discrimination. In your complaint, state the basis of discrimination (e.g., race, disability, sex), what happened, why you believe that the action was taken, and the resolution you are seeking.

If you disagree with the county's decision on your discrimination complaint, you may appeal the finding to the California Department of Social Services or, if it involves the Food Stamp program, to the U.S. Department of Agriculture. THE DISCRIMINATION COMPLAINT PROCESS DIFFERS FROM THE STATE HEARING PROCESS. YOU HAVE THE RIGHT TO REQUEST A STATE HEARING IF YOU BELIEVE THAT THE COUNTY MADE AN INCORRECT DECISION ON YOUR BENEFITS IN ADDITION TO FILING A DISCRIMINATION COMPLAINT.

In Conclusion

If you have any question about the information in this paper—your rights or what you should do if you think your rights have been violated—ask someone in your county welfare department or talk with someone at Public Inquiry and Response, California Department of Social Services.

Also, it may be helpful to obtain written information which explains the public assistance for which you are applying or receiving. It is available at your county welfare department. If a leaflet about the program is not offered to you, ask for it. **One way to ensure that you are treated fairly is to know what you are entitled to receive.**



STATE OF CALIFORNIA

Arnold Schwarzenegger, Governor

HEALTH AND HUMAN SERVICES AGENCY

Kimberly Belshé, Secretary

DEPARTMENT OF SOCIAL SERVICES

This publication is available in large print and also on audio tape upon request from your county.

You should tell the county if you have a disability and need help applying for or continuing to receive aid, benefits, and services.

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