STATE OF CALIFORNIA - HEALTH AND WELFARE AGENCY

Edmund G. jown Jr., Governor

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DEPARTMENT OF SOCIAL SERVICES 744 P Street Sacramento, California 95814 Telephone: (916) 445-0633

February 26, 1982

ALL-COUNTY LETTER NO. 82-17

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: Notice of Action Language for Implementing Loss of \$30 and 1/3 Earned Income Disregard After Four Consecutive Months REFERENCE:

For use in notices of action implementing the termination of the \$30 and 1/3 earned income disregard to recipients who have received the disregard for four consecutive months, you should use the following language, which has been approved by the court in <u>Turner</u> v. Woods.

months were (month) (month) (month)

and

(month)

// We have determined that the request for discontinuance of aid in the month of ______ was for the purpose of avoiding the four month limit."

The above language should be included in the "Reason(s) for the Action" section of Form NA 294(12/81) or its equivalent.

GEN 654 (9/79)

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The notice of action must, of course, be complete. It must contain a statement of the proposed action, the grant recomputation, any additional reasons or comments for a grant or aid change because of other changes in the family budget unit or its income, and appropriate regulation citations.

The regulation citations for the termination of the \$30 and 1/3 earned income disregard after four consecutive months are MPP sections 44-111.23 and 44-207.32. Citation to P.L. 97-35 is not adequate.

Sincerely,

KYLE S. MCKINSE Deputy Director

cc: CWDA