

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



January 25, 1999

ALL-COUNTY LETTER NO. 99-05

REASON FOR THIS TRANSMITTAL

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

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: CALIFORNIA FOOD ASSISTANCE PROGRAM (CFAP) SURVEY

REFERENCE: ACL 98-76 (SEPTEMBER 25, 1998)

Assembly Bill (AB) 1656 (Chapter 324, Statutes of 1998) requires that California Food Assistance Program (CFAP) data be provided to the Senate and Assembly budget sub-committees for the Spring 1999 budget sub-committee hearings. The five items identified for this report, and the method to be used for their collection, are discussed below.

The following items must be provided by counties on the attached survey form for CFAP persons reported on the Food Stamp Program Participation and Coupon Issuance Report (DFA 256) for January 1999:

1. Number of CFAP persons who also participated in CalWORKs.
2. Number of CFAP persons **NOT** also receiving CalWORKs, who met the work requirement through:
 - a. Non-subsidized employment
 - b. Subsidized employment
3. Number of persons who are eligible for CFAP because they entered the U.S. on or after August 22, 1996 and their:
 - a. Sponsor died
 - b. Sponsor became disabled
 - c. Sponsor inflicted domestic violence

The California Department of Social Services (CDSS) will provide:

4. The number of persons receiving CFAP from the DFA 256 for January 1999.
5. The range of work hours required by each county for program participation, from individual county plans.

Submit the completed survey by February 19, 1999, to:

California Department of Social Services
Reports Unit M.S. 19-81
P.O. Box 944243
Sacramento, CA 94244-2430

Or you may fax the completed survey to (916) 322-9254.

If you have questions regarding this survey, contact Ginger Simpson at (916) 323-7536. If you have CFAP eligibility questions, contact Ernie Villalobos of the Food Stamp Bureau at (916) 657-1680.

***Original Document Signed By
Bruce Wagstaff on 1/25/99***

BRUCE WAGSTAFF
Deputy Director
Welfare to Work Division

Attachments

c: CWDA

Send ~~original~~ copy to: Department of Social Services
 Reports Unit, M.S. 19-81
 P.O. Box 944243
 Sacramento, CA 94244-2430
 FAX: (916) 322-9254

California Food Assistance Program (CFAP) Survey

COUNTY	COUNTY CODE
REPORT MONTH AND YEAR	
January 1999	

1. Number of CFAP persons who also participated in CalWORKs.....
 (Any form of CalWORKs, not just cash aid)

2. Number of CFAP persons not also receiving CalWORKs, who met the work requirement through:
 (Include all CFAP persons in the household even if only one person worked to meet the number of hours required)
 - a. Non-subsidized employment.....
 - b. Subsidized employment.....

3. Number of persons who are eligible for CFAP because they entered the U.S. on or after August 22, 1996 and their:
 - a. Sponsor died.....
 - b. Sponsor became disabled.....
 - c. Sponsor inflicted domestic violence.....

COMMENTS:

ITEM	INSTRUCTIONS
1	Report the number of CFAP persons reported on the January 1999 Food Stamp Program Participation and Coupon Issuance Report (DFA 256), who also are counted in the household unit for CalWORKs (any form of CalWorks, not just cash aid).
2a	Report the number of CFAP persons reported on the January 1999 DFA 256, NOT also receiving CalWORKs, who met the work requirement by working for pay for which their employer <u>did not</u> receive a government subsidy. Count all CFAP persons in the household who were determined eligible even if only one person worked to meet the number of hours required.
2b	Report the number of CFAP persons reported on the January 1999 DFA 256, not also receiving CalWORKs, who met the work requirement by working for pay for which their employer received a government subsidy. Count all CFAP persons in the household who were determined eligible even if only one person worked to meet the number of hours required.
3	Report the number of persons reported on the January 1999 DFA 256 who are eligible because either their sponsor died; their sponsor became disabled; or because of domestic violence inflicted by their sponsor. This includes only persons who were otherwise eligible for CFAP but entered the United States on or after August 22, 1996, and had a sponsor who died, became disabled or inflicted domestic violence.
SURVEY PREPARED BY:	
TELEPHONE	
()	
DATE	