NOTICE OF FORM CHANGE NO. 05-147

	DATE
	11/17/2005

TO:
County Welfare Director
Supply Clerk / Forms Coordinator

FROM:
Forms Management Unit
(916) 657-1907

☐ Community Care Licensing District Offices   ☐ District Attorney
☐ Private and Public Adoption Agencies   ☐ 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   CA 800M1 (11/05) CalWORKs Assistance, Recent Non-Citizens Mixed Cases Case Count Information

ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	☒ Free ☐ Sold		☐ Yes ☒ No

☐ New   ☒ Revised   DATE OF FORM 11/05   REPLACES 1/05   ☐ Obsolete

REQUIRED FORM-   REQUIRED FORM-
☒ No Change Permitted   ☐ Substitute Permitted With Prior DSS Approval   ☐ Recommended Form

UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:
**Department of Social Services Warehouse
P.O. Box 980788
West Sacramento, CA 95798-0788**

☐ 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
This is a Microsoft Excel document and is the available on the Financial Services Bureau Automated Assistance Claims Webpage.

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

CALIFORNIA WORK OPPORTUNITY AND RESPONSIBILITY TO KIDS (CalWORKs)
ASSISTANCE, RECENT NON-CITIZENS MIXED CASES
CASE COUNT INFORMATION

County	Date (Month/Year)
Claim Contact Person	Telephone

		A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T
		All Families				Zero Parent Families				Two Parent Families				TANF Timed Out				TOTALS			
Aid Code		3E				3H				3U				3W				3E, 3H, 3U, and 3W			
		Federal Person Count		State Person Count		Federal Person Count		State Person Count		Federal Person Count		State Person Count		Federal Person Count		State Person Count		Federal Person Count		State Person Count	
		Adults	Children	Adults	Children	Adults	Children	Adults	Children	Adults	Children	Adults	Children	Adults	Children	Adults	Children	Adults	Children	Adults	Children
	Current Month																				
1	Main Payroll																	-	-	-	-
2	Current Month Supplemental Payroll																	-	-	-	-
3	Current Month Cancellation Contra Roll																	-	-	-	-
4	Prio Month Supplemental Payroll																	-	-	-	-
5	Current Month Adjustment																	-	-	-	-
6	**Subtotal (Lines 1-5)**	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Prior Month																				
7	Prior month cancellation Contra Roll																	-	-	-	-
8	Recoveries of aid																	-	-	-	-
9	Prior Month Negative Adjustment																	-	-	-	-
10	**Subtotal (Lines 7 - 9)**	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11	Prior Month Positive Adjustment																	-	-	-	-
12	Grant-Based On-the Job Training (OJT) (Wage Subsidy)																	-	-	-	-
13	**TOTAL PERSONS COUNT, Current + Prior Months (Lines 6+10+11+12)**	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
14	Total Number of Federal Assistance Units																				-

Aid Code			3E		3E		3H		3H		3U		3U		3W		3W		Total		Total
	DISTRIBUTION OF GRANT PAYMENTS		FFP		NonFederal		FFP		NonFederal		FFP		NonFederal		FFP		NonFederal		FFP		NonFederal
15	Subject to FFP		-								-				-				-		
16	NonFederal																				-

		Federal (97.5/2.5)		State (95/5)		Federal (97.5/2.5)		State (95/5)		Federal (97.5/2.5)		State (95/5)		Federal (97.5/2.5)		State (95/5)		Federal		State	
	Grant-Based OJT (Wage Subsidy)	PC	Amount	PC	Amount	PC	Amount	PC	Amount	PC	Amount	PC	Amount	PC	Amount	PC	Amount	PC	Amount	PC	Amount
17	Distribution of Grant Payment																	-	-	-	-
18	Federal		-								-							-			
19	State				-								-							-	
20	County		-		-						-		-					-		-	

**INSTRUCTIONS FOR FORM CA 800M1
CALWORKS ASSISTANCE,
RECENT NON-CITIZENS MIXED CASES
CASE COUNT INFORMATION**

General Information

1.   Enter county name, and month and year of claim in space provided.
2.   Enter name and telephone number of county staff person to be contacted if there are any questions regarding the claim.
3.   This form is pre-programmed to round all amounts to the nearest dollar.

Current Month

For each column:
4.   Lines 1 through 5: Enter the persons count shown on the integrated payroll summary. For non-integrated payrolls, enter the grand totals shown for each payroll. Only current month adjustments should be entered on Line 5.
5.   Line 6: Subtotal of Lines 1 through 5. This amount will calculate automatically.

Prior Month

For each column:
6.   Line 7: Enter the persons count shown on the integrated payroll summary. For non-integrated payrolls, enter the grand totals shown for each contra-roll.
7.   Line 8: Enter the persons count information related to <u>all cash recovered</u> in this month for aid paid in a prior month. This includes cash abatements or repayments of overpayments received during this report month.
8.   Line 9: Enter the persons count information for all prior month negative adjustments which decrease money amounts that were claimed in a prior month summary report.
9.   Line 10: Subtotal of Lines 7 through 9. This amount will calculate automatically.

Positive Adjustments and Grant-Based On-the-Job Training (OJT) (Wage Subsidies)

10.   Line 11: Enter the persons count shown on the separate listing for prior month positive adjustments which were or should have been claimed on a prior month Summary Report.
11.   Line 12: Enter persons count paid for grant based OJT (Wage Subsidies). Persons count information related to residual payments, if any, should be reported to the appropriate category in Lines 1 through 9.

Totals

12.   Line 13: Total persons count, current and prior months. This amount will calculate automatically.
13.   Line 14: Enter the total number of federal assistance units (AUs) represented in Line 13. The numbers in this line will automatically populate Line 17 of the CA 800M.
14.   Line 15: Total grant payments for federally-eligible cases subject to Federal Financial Participation (FFP). These amounts shall be automatically calculated (See CFL 97/98-41).
15.   Line 16: Enter the total grant payments for nonfederal cases only. These amounts should match the amounts on Line 14 of the CA 800M.

Grant Based OJT (Wage Subsidy)

16.   Line 17: Enter the number of person count (PC) and payment amounts represented in Line 12. The total federal, state, and county shares will calculate automatically at the appropriate rates. The total federal and state shares should match the amounts on Line 12 of the CA 800M.