

NOTICE OF FORM CHANGE NO. 06-079

DATE

06-07-2006

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 **TEMP 2193A (5/06) ENG/SP**
Notice to all Food Stamp Recipients - Important - Please Read

ORDER UNIT MASTER ONLY	<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 5/06	REPLACES 3/01	<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 date of this notice

USE FORM IN ACCORDANCE WITH

- All County Letter No. 06-14
 Other (specify)

ADDITIONAL INFORMATION REGARDING FORM CHANGE

Attached is a Reproducible Copy

Print form: 8 1/2 x 11, one sided.

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) 651-8876 or by electronic mail at LTS@dss.ca.gov.

NOTICE TO ALL FOOD STAMP RECIPIENTS IMPORTANT — PLEASE READ

The United States Department of Agriculture (USDA) has approved an increase to the Standard Utility Allowance (SUA), which may be used in figuring out your food stamp benefit. Effective August 1, 2006, the SUA amount was raised from \$223.00 to \$271.00. Most families get more food stamps when a utility allowance increases unless there are other household changes that could lower benefits

You will get a separate notice if your food stamps change for other reasons.

If you think we made a mistake in figuring your August food stamps due to the new SUA you may ask for a state hearing, ***within 90 days of when you got this letter*** by writing to:

or you may call toll free: 1-800-952-5253. If you are deaf and use TDD, call 1-800-952-8349. When you ask for a state hearing, you must tell us why you think we made a mistake. You can speak for yourself at the hearing or you can have a friend, attorney, or other person speak for you, but you must get these people to help you. You may ask for free legal aid at a legal aid office in your area.

AVISO A TODAS LAS PERSONAS QUE RECIBEN ESTAMPILLAS PARA COMIDA IMPORTANTE — FAVOR DE LEER

El Departamento de Agricultura de los Estados Unidos (USDA) aprobó un aumento en la cantidad normal permitida para servicios públicos y municipales (esta cantidad se conoce como SUA por sus siglas en inglés). Es posible que la SUA se utilice en el cálculo de sus beneficios de estampillas para comida. A partir del 1º de agosto de 2006, la SUA aumentó de \$223.00 a \$271.00. La mayoría de las familias reciben más estampillas para comida cuando hay un aumento en la cantidad normal permitida para servicios públicos y municipales a menos que haya otros cambios en el grupo que pudieran reducir los beneficios.

Recibirá una notificación por separado si sus estampillas para comida cambian debido a otras razones.

Si cree que cometimos un error al calcular la cantidad de sus estampillas para comida correspondientes al mes de agosto debido a la nueva SUA, puede pedir una audiencia con el Estado ***antes de que pasen 90 días a partir de la fecha en que recibió esta carta***, escribiendo a:

o llamando gratuitamente al 1-800-952-5253. Si es sordo y usa un aparato de telecomunicaciones para las personas sordas (TDD), llame al 1-800-952-8349. Cuando pida una audiencia con el Estado, tiene que decirnos por qué cree que cometimos un error. Puede representarse a sí mismo en la audiencia o puede representarle un amigo, un abogado u otra persona, pero usted tiene que pedirle a esa persona que le ayude. Puede pedir asistencia legal gratuita en una oficina de asesoramiento legal (*legal aid*) en el área donde usted vive.