NOTICE OF FORM CHANGE NO. 06-113					08/21/2006	
To: County Welfare Di Supply Clerk / For		FROM: Forms Management Unit (916) 657-1907				
☐ Community Care Licens ☐ Private and Public Adop	•		District Attorney Other			
Listed below is information re				wn.		
FORM NUMBER AND TITLE DFA 285 Food Sta	B (7/06) Imp Budget Worksheet/cha	ange Reporti	ng Households			
ORDER UNIT MASTER ONLY		ESTIMATED PR	ICE	INITIAL SUPPLY SENT  ☐ Yes  ☐ No		
☐ New ☐ Revised	DATE OF FORM 7/06	REPLACES 12/03			Obsolete	
REQUIRED FORM- No Change Permitted UNLESS OTHERWISE SPECIFIED STO Department of Social Servi P.O. Box 980788 West Sacramento, CA 9579	ces Warehouse	ted With Prio	r DSS Approval	Red	commended Form	
	FORMS DISPOSITI	ON AND SP	ECIAL INSTRUCTION	ONS		
DISPOSITION OF OLD SUPPLY  Use until exhausted		☐ Dest	roy			
use NEW FORM  When supply available in	Use new form effective					
USE FORM IN ACCORDANCE WITH   ☐ All County Letter No. 06  ☐ Other (specify)	S-31					
ADDITIONAL INFORMATION REGARDING FO						
Print form: 8 1/2 x 11, 2 side	ed.					
When stock depleted at the	CDSS Warehouse, will be	be Master O	nlv.			

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

For camera-ready copies of English form, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov.

## FOOD STAMP BUDGET WORKSHEET/CHANGE REPORTING HOUSEHOLDS

FOOD STAMP BUDGET WORKSHEE	I/CHANGE REPORTING	HOUSEHOLDS	
CASE NAME	CASE NUMBER	COMPANION CASE REFERENCE	CLASSIFICATION  NA PA MIXED TFS
CERTIFICATION PERIOD FROM THROUGH	ISSUANCE MONTH	ISSUANCE MONTH	DOCUMENTATION
PART 1 - GROSS INCOME ELIGIBILITY			
A. NONEXEMPT GROSS EARNED INCOME  1. Gross Salary, Wages  2. Self-Employment  3. Training Allowance  4. Total Gross Earned Income (A1 + A2 + A3)  B. NONEXEMPT GROSS UNEARNED INCOME	\$ \$ \$ \$	\$ \$ \$ \$	
<ol> <li>Cash Aid</li> <li>Social Security, UIB, DIB, Pensions</li> <li>Child/Spousal Support</li> <li>Scholarships, Grants, Loans</li> <li>Other</li> <li>Total Gross Unearned Income (B1 + B2 + B3 + B4 + B5)</li> </ol> C. GROSS INCOME TEST	\$ \$ \$ \$ \$	\$	
Household Size     Maximum Gross Income Allowed (from Table)     Total Gross Monthly Income (A4 + B6)     Gross Income Eligible? (Is C3 less than or equal to C2?)  PART 2 - NET INCOME ELIGIBILITY	\$ \$ NO  Prospective Retrospective	\$ S NO  Prospective Retrospective	
D. INCOME (For Prospective Budgets Only)			1
D. INCOME (For Prospective Budgets Only)  1. Adjusted Gross Earned Income (80% of A4)  2. Nonexempt Gross Unearned Income(B6 + D1)  E. NONEXEMPT GROSS EARNED INCOME  (For Retrospective Budgets Only)	<u>\$</u> <u>\$</u>	<u>\$</u> <u>\$</u>	
Gross Salary, Wages     Self-employment     Training Allowance     Total Gross Earned Income (E1 + E2 + E3)     Adjusted Gross Earned Income (80% of E4)     NONEXEMPT GROSS UNEARNED INCOME (For Retrospective Budgets Only)	\$ \$ \$ \$	\$ \$ \$ \$ \$	
<ol> <li>Cash Aid</li> <li>Social Security, UIB, DIB, Pensions</li> <li>Child/Spousal Support</li> <li>Scholarships, Grants, Loans</li> <li>Other</li> <li>Total Gross Unearned Income (F1 + F2 + F3 + F4 + F5)</li> <li>Total Nonexempt Gross Income (E5 + F6)</li> </ol>	\$ \$ \$ \$ \$	\$ \$ \$ \$ \$	
<ul> <li>G. STANDARD/DEPENDENT CARE/HOMELESS SHELTER/DEDUCTIONS</li> <li>1. Standard Deduction:</li> <li>2. Dependent Care (Lesser of Actual or Maximum)</li></ul>	\$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$	
G4)  H. SHELTER DEDUCTION  1. Total Housing Costs 2. Total Utility Allowance 3. Total Shelter Costs 4. Allowable Shelter Costs (50% of G5) 5. Excess Shelter Costs (H3 - H4) 6. Maximum Allowance for Shelter 7. Allowable Shelter Deduction (Less of H5 or H6) I. NET MONTHLY INCOME (G5 – H7) J. NET INCOME TEST 1. Household Size 2. Maximum Net Income Allowable from 3. Net Income eligible	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
•	☐ YES ☐ NO	☐ YES ☐ NO	
PART 3 - BENEFITS	ALLOTMENT SUPPLEMENT	ALLOTMENT SUPPLEMENT	
E.W. Initials/Date			
		<u>i</u>	

/ DE	SOURCE ELIGIBILITY (Nonexempt Resources Only)	ISSUA MONT		ISSUA MONT		
	Previous Month's Resources					
		\$		\$		
2.	Additional Resources (specify)					
	a b					
	C					
3.	Subtotal (K1 + K2a + K2b + K2c)		\$		\$	
	Resources Sold, Traded or Given Away (specify)		*		·	
	a	\$		\$		
	b					
	C					
5.	Subtotal (K4a + K4b + K4c)		\$		\$	
	Current Resources (K3 - K5)		\$		\$	
7.	Resource Eligible?		☐ YES ☐ NO		$\square$ YES $\square$ NO	
AR	4-INCOME COMPUTATIONS	ISSUA MONT		ISSUA MONT		
	LF-EMPLOYMENT (Nonexempt Resources Only)	IVICINI	1	IWIOINI		
	Gross Income from Self-Employment	\$		\$		
2.	Expenses: Standard 40% Deduction					
	☐ Actual Expenses (Verification Required)					
3.	Total Nonexempt Income from Self-Employment		\$		\$	
	If averaging self-employment income go to L7. If adjusting	ı	¥ <u></u>		¥	
	a previous average, continue to L4.					
	Adjustment to Gross Income	\$		\$		
	Adjustment to Expenses					
	Adjusted Self-Employment Income (L3 + L4 + L5)		\$		\$	
7.	Monthly Self-Employment Income (L3 or L6 ÷ number of months income covers)		\$		\$	
	,	ISSUANCE		ISSUA	ISSUANCE	
EL	DUCATIONAL GRANTS, SCHOLARSHIPS AND LOANS	MON		MONT		
1.	Income from Grants, Scholarships or Loans					
2.	Tuition and Mandatory Fees	\$		\$		
3.	Total Nonexempt Educational Income (M1 – M2)					
4.	Monthly Income from Grants, Scholarships or Loans		\$		\$	
	(M3 ÷ number of months income covers)		\$		\$	
	,		Ψ			
AR	5-REPORTED CHANGES (Other than the CA 7 or DF	-A 37	7.5	1		
/pe	of Change					
ate	Change					
ccu	rred					
ate	Change					
epo	rted					
\// I	nitials					