

## CALFRESH RECERTIFICATION APPOINTMENT LETTER

•	•	Date	:
		Case Number	:
		Case Name	:
		Worker Name	:
		Worker Number	:
		Worker Telephone	:
•	•	Address	:

You were notified that your CalFresh certification period ends on \_\_\_\_\_ . You need an interview to keep getting CalFresh benefits. This is your appointment letter for your interview.

MM/DD/CCYY

You have a telephone CalFresh recertification interview appointment. **If you prefer to be interviewed in person, please call the county at the number above for an appointment.**

APPOINTMENT DATE:	APPOINTMENT TIME:
YOUR PHONE NUMBER:	ALTERNATIVE PHONE NUMBER:

We will call you at the number provided above. If the number is not correct, you must call us and provide a number where you can be reached for your interview. It is very important that we are able to reach you. You may also want to provide an alternative phone number where you can be reached. County phone numbers may be blocked. If your phone does not accept blocked numbers, you may miss the phone call for your telephone interview, and your benefits may be delayed. If you miss your scheduled interview you will have to reschedule your interview. Call the county at the number above or go to the office address listed above to reschedule your interview.

You have a face-to-face CalFresh recertification interview appointment.

APPOINTMENT DATE:	APPOINTMENT TIME:		
COUNTY OFFICE NAME:			
COUNTY OFFICE ADDRESS	CITY:	STATE:	ZIP CODE:

**IMPORTANT REMINDERS**

- Failure to complete the interview may result in a delay or may end your CalFresh benefits.
- If you do not complete your interview within the timeframe listed in this letter, it is your responsibility to reschedule it.
- To change your appointment, please contact the county.
- Required verification must be turned in within 10 days of the county asking for it.  
Please tell the county if you need help getting this information. The county can help you get it.

**COMMENTS:**