



CDSS

WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



EDMUND G. BROWN JR.
GOVERNOR

February 17, 2012

ALL COUNTY LETTER (ACL) NO. 12-09

TO: ALL COUNTY WELFARE DIRECTORS
ALL CALFRESH COORDINATORS
ALL CALWORKS PROGRAM COORDINATORS
ALL CONSORTIA PROJECT MANAGERS

SUBJECT: REVISED CALFRESH MONTHLY CASELOAD
MOVEMENT STATISTICAL REPORT [DFA 296 (1/12)]

REFERENCE: ACL 10-32 FOOD STAMP WAIVER FOR THE RESTORATION OF
ELIGIBILITY AND BENEFITS, DATED JULY 23, 2010

ACL 10-55 IMPLEMENTATION OF THE RENAMING OF THE
FOOD STAMP PROGRAM TO CALFRESH, DATED
NOVEMBER 23, 2010

ACL 11-22 IMPLEMENTATION OF THE NEW INTER-COUNTY
TRANSFER PROCESS (ICT) FOR CALFRESH PROGRAM
BENEFITS, DATED MARCH 25, 2011

This letter provides the revised DFA 296, CalFresh Monthly Caseload Movement
Statistical Report. The DFA 296 has been revised to incorporate:

- The change of program name from Food Stamps to CalFresh.
- The collection of data for ICT of CalFresh cases, new Item 7c: ICTs received (ACL 11-22).
- The collection of data for the restoration of eligibility and benefits, new Item 8d: Restoration cases with benefits pro-rated (ACL 10-32).
- Formatting changes to standardize the DFA 296.

REASON FOR THIS TRANSMITTAL

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

ACL NO. 12-09
Page Two

Counties are required to use the revised DFA 296 (1/12) beginning with the report month of January 2012. Counties must submit the DFA 296 report to the California Department of Social Services (CDSS) no later than the 20th calendar day of the month following the report month.

To complete the electronic form, counties should download a copy of the DFA 296 and its instructions from <http://www.cdss.ca.gov/dssdb/>. Please submit the report via e-mail to the CDSS Data Systems and Survey Design Bureau (DSSDB) at admdfa296@dss.ca.gov. The DFA 296 form and instructions are attached for reference.

If you have any questions regarding the completion of this report, please contact DSSDB at (916) 651-8269. Program related questions should be directed to the CalFresh Branch at (916) 651-8047.

Sincerely,

Original Document Signed By:

FRAN MUELLER
Deputy Director
Administration Division

Attachments

CALFRESH MONTHLY CASELOAD MOVEMENT STATISTICAL REPORT DFA 296

DOWNLOAD REPORT FORM FROM:
<http://www.cdss.ca.gov/dssdb>
E-MAIL COMPLETED REPORT FORM TO:
admdfa296@dss.ca.gov

COUNTY NAME	VERSION <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISED	REPORT MONTH	REPORT YEAR
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PART A. APPLICATIONS FOR CALFRESH

1. Applications pending at the beginning of the month.....	1
a. Item 5 from last month's report, as reported to CDSS.....	2
b. Adjustment (Item 1 minus Item 1a).....	3
2. Applications received during the month.....	4
3. Total applications on hand during the month (Item 1 plus Item 2).....	5
4. Applications disposed of during the month (Sum of Items 4a, 4b and 4c).....	6
a. Applications approved (Same as Item 7a)	7
1) Applications approved in over 30 days (CWD caused)	8
b. Applications denied.....	10
1) Applications denied in over 30 days (CWD caused).....	12
c. Applications withdrawn.....	14
5. Applications pending at the end of the month (Item 3 minus Item 4).....	16

PART B. CERTIFIED CASELOAD MOVEMENT

6. Cases pending at the beginning of the month.....	17	18														
a. Item 10 from last month's report, as reported to CDSS.....	19	20														
b. Adjustment (Item 6 minus Item 6a, positive or negative number, explain in Comments).....	21	22														
7. Cases added during the month (Sum of Items 7a, 7b, 7c and 7d).....	23	24														
<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th colspan="3">PACF</th><th colspan="3">NACF</th></tr> <tr><th>Federal</th><th>Fed/State</th><th>State</th><th>Federal</th><th>Fed/State</th><th>State</th></tr> </table>			PACF			NACF			Federal	Fed/State	State	Federal	Fed/State	State		
PACF			NACF													
Federal	Fed/State	State	Federal	Fed/State	State											
a. Applications approved.....	25	26	27	28	29	30	31	32								
b. Change in assistance status from PACF or NACF.....							33	34								
c. Inter-County Transfers							35	36								
d. Other approvals.....							37	38								
8. Total cases open during the month (Certified eligible to participate during the month) (Item 6 plus Item 7; also sum of 8a, 8b, 8c and 8d).....							39	40								
a. Pure federal cases.....							41	42								
1) Federal persons in Item 8a cases plus federal persons in Item 8b cases.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th colspan="2">Federal Persons</th><th colspan="2">State Persons</th></tr> <tr><th></th><th></th><th>Singles</th><th>Families</th></tr> </table>		Federal Persons		State Persons				Singles	Families					46	47
Federal Persons		State Persons														
		Singles	Families													
b. Federal/State combined cases.....							50	51								
c. Pure state cases.....							52	53								
d. Restoration cases with benefits pro-rated during the month.....							54	55								
9. Cases terminated during the month.....							56	57								
10. Cases pending at the end of the month (Item 8 minus Item 9).....							58	59								

PART C. RECERTIFICATIONS

11. Recertifications disposed of during the month (Item 11a plus Item 11b).....	57	58												
<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th colspan="3">PACF</th><th colspan="3">NACF</th></tr> <tr><th>Federal</th><th>Fed/State</th><th>State</th><th>Federal</th><th>Fed/State</th><th>State</th></tr> </table>			PACF			NACF			Federal	Fed/State	State	Federal	Fed/State	State
PACF			NACF											
Federal	Fed/State	State	Federal	Fed/State	State									
a. Determined continuing eligible.....	59	60	61	62	63	64	65	66						
b. Determined ineligible.....	67	68	69	70	71	72	73	74						
12. Overdue recertifications (CWD caused) during the month.....							75	76						

COMMENTS			
CONTACT PERSON	TELEPHONE	EXTENSION	FAX
TITLE/CLASSIFICATION	E-MAIL		DATE SUBMITTED

**CALFRESH MONTHLY CASELOAD MOVEMENT
STATISTICAL REPORT
DFA 296 (1/12)**

INSTRUCTIONS

CONTENT

This monthly report includes data on the number of CalFresh applications received, approved, denied, and withdrawn; the number of persons eligible; Inter-County Transfers (ICT) received; restoration of pro-rated benefits; recertifications disposed of; and the number of overdue recertifications during the month.

PURPOSE

The DFA 296 provides data for the Food and Nutrition Service (FNS) federally mandated Program Activity Statement (FNS-366-B) as well as for federally approved waivers. It also allows measurement of program performance in meeting state and federal issuance standards. In addition, this report provides county, state, and federal entities with information needed for budgeting, staffing and program planning.

COMPLETION AND SUBMISSION

The County Welfare Department (CWD) is responsible for ensuring that this report is fully and accurately completed. If portions of the report are completed by more than one entity within the CWD and/or outside agencies, the contact person responsible for submitting the report to the state shall review the report for completeness and accuracy prior to submittal. Reports are to be received on or before the 20th calendar day of the month following the report month.

If a county determines that a revision is needed to its previously submitted report, the county shall submit a revised report for the applicable month(s). The California Department of Social Services' (CDSS) policy requires counties to revise current State Fiscal Year (FY) reports and two prior FYs if needed.

Download an Excel version of the report form from <http://www.cdss.ca.gov/dssdb>, complete the downloaded form, and e-mail to CDSS, Data Systems and Survey Design Bureau (DSSDB) at admdfa296@dss.ca.gov. The e-mail submission process contains automatic computation of some cells and easy e-mail transmission of completed forms to DSSDB. The website contains specific instructions and guidance. If you have questions regarding completion or submission of the report, contact DSSDB at (916) 651-8269.

For reference purposes, copies of the report form and instructions can be downloaded from the CDSS Research and Data Reports (RADR) website at <http://www.cdss.ca.gov/research/>. The report's released monthly statewide and county-specific data is also available on the website.

GENERAL INSTRUCTIONS

Enter in the boxes provided near the top of the form the county name, version (Initial or Revised) and the report month and year.

Enter the data required for each item. If there is nothing to report for an item, enter "0". **Do not leave any items blank.** If your county does not provide a particular service/activity or the service/activity is provided but the county is unable to collect or track the data, enter "0" and explain in the Comments section.

GENERAL INSTRUCTIONS (Continued)

Enter in the boxes at the end of the form the name, job title or classification, telephone number, fax number, and e-mail address of the person to contact if there are questions about the report. This person may or may not be the person who completed the report. Enter the date the report was submitted (this is usually the date when the report is e-mailed to DSSDB).

DEFINITIONS

Adjustment: Changes in caseload resulting from actions authorized (including those authorized by mistake or in error) in prior months and not previously reported, are to be reported as an adjustment. Whenever an adjustment is reported, the county must include a footnote in the Comments section of the report explaining why an adjustment was needed.

Application (for CalFresh): For reporting purposes, a request for CalFresh which has been received and recorded by the county, on Form CA 1/SAWS 1, or Application for CalFresh Benefits, DFA 285 A1. A request for CalFresh benefits is a signed application containing at least the applicant name and address that has been received by the appropriate CalFresh office.

Change in Assistance Classification: A household whose assistance classification is changed from Public Assistance CalFresh (PACF) to Nonassistance CalFresh (NACF) or from NACF to PACF.

Denied: An application or request for CalFresh that is denied. A denial may occur for any reason, e.g., excess income and/or resources; failure to complete necessary forms; failure to provide essential verification, etc.

Inter-County Transfer (ICT): Transfer of responsibility for a case from one county to another, i.e., household moves from one county to another.

Movement: CalFresh case flow within this report revealing changes occurring in the caseload during the month. A change made to a case during the report month in household composition, eligibility status, assistance classification or funding that will cause a CalFresh case to be counted in a different category in the next month.

Nonassistance CalFresh (NACF): A household which receives CalFresh benefits in which none or less than all of its members also receive public assistance.

Public Assistance CalFresh (PACF): A household funded under Title IV-A of the Social Security Act of 1935, as amended, or matching state funds for public assistance programs. Programs must be means-tested and all household members must be receiving or authorized to receive benefits from a Temporary Assistance to Needy Families (TANF), or state-funded program.

Recertifications: A required application for continuing benefits received no later than the end of the last month of certification is considered a recertification. Transitional CalFresh cases (TC) moving to ongoing benefits should be included here.

Restoration of Benefits: Households whose benefits are discontinued by the county and then restored with benefits pro-rated pursuant to FNS waiver #2090046.

Transitional CalFresh: Former Public Assistance CalFresh households, whose CalWORKs grant is discontinued, can receive up to five months of Transitional CalFresh. These households will be classified as Nonassistance CalFresh cases as they are no longer receiving CalWORKS cash aid.

ITEM INSTRUCTIONS (Continued)**PART A. APPLICATIONS FOR CALFRESH**

Part A summarizes CalFresh application (for certification) intake activity during the report month. A request for CalFresh is a signed application containing at least the applicant name and address that has been received by the appropriate CalFresh office. For purposes of this report, "cases" and "households" are interchangeable.

1. Applications pending at the beginning of the month: Enter the number of applications pending at the beginning of the month. This number should be the same figure as Item 5 of the previous month's report. If the number is different than Item 5 of the previous month's report, enter the new figure in Item 1 and the automated form will calculate an adjustment in Item 1b (Cell 3). [Cell 1]
 - a. Item 5 from last month's report, as reported to CDSS: Enter Item 5 "Applications pending at the end of the month" exactly as it was reported to CDSS in last month's report. [Cell 2]
 - b. Adjustment (Item 1 minus Item 1a): **This item will be automatically calculated.** If an adjustment has been calculated (either a positive or negative number) explain in Comments with the precise reason(s) for the change. An adjustment is only calculated when last month's Item 5 is not exactly the same number as this month's Item 1. If there is no adjustment, a zero will display in this cell. [Cell 3]
2. Applications received during the month: Enter the number of new applications received during the report month. This count should also include all applications received during the month and subject to review at initial filing for entitlement of Expedited Service. Do not include recertifications or applications for restored benefits not mandated by a court order. [Cell 4]
3. Total applications on hand during the month (Item 1 plus Item 2): **This item will be automatically calculated.** This is the sum of Items 1 and 2. [Cell 5]
4. Applications disposed of during the month (Sum of Items 4a, 4b and 4c): **This item will be automatically calculated.** This is the sum of Items 4a, 4b and 4c (the sum of Cells 7, 10, 11, 14 and 15). [Cell 6]
 - a. Applications approved (Same as Item 7a): **This item will be automatically calculated.** This is the number of applications approved by county action for CalFresh during the report month. This item equals Item 7a. [Cell 7]
 - 1) Applications approved in over 30 days (CWD caused): Enter the number of applications reported in Item 4a (approvals) which were processed in over 30 days due to CWD error. Provide information for both public assistance (PACF) and Nonassistance (NACF) households. [Cell 8 and Cell 9]
 - b. Applications denied: Enter the number of applications denied by county action during the report month. Provide information for both PACF and NACF households. [Cell 10 and Cell 11]
 - 1) Applications denied in over 30 days (CWD caused): Enter the number of applications reported in Item 4b (denials) which were processed in over 30 days due to CWD error. Provide information for both PACF and NACF households. [Cell 12 and Cell 13]

ITEM INSTRUCTIONS (Continued)

- c. Applications withdrawn: Enter the number of applications, by assistance classification, voluntarily withdrawn by the applicant household. [Cell 14 and Cell 15]
5. Applications pending at the end of the month (Item 3 minus Item 4): **This item will be automatically calculated.** This is the number of applications pending at the end of the month. This is the total applications in Item 3 minus the number disposed in Item 4. This count will be entered in next month's report in Item 1a (Cell 3). [Cell 16]

PART B. CERTIFIED CASELOAD MOVEMENT

6. Cases pending at the beginning of the month: Enter the number of cases pending at the beginning of the month. This number should be the same figure as Item 10 of the previous month's report. If the number is different than Item 10 of the previous month's report, enter the new figure in Item 6 and the automated form will calculate an adjustment in Item 6b. [Cell 17 and Cell 18]
- a. Item 10 from last month's report, as reported to CDSS: Enter Item 10 "Cases pending at the end of the month" exactly as it was reported to CDSS in last month's report. [Cell 19 and Cell 20]
- b. Adjustment (Item 6 minus Item 6a, positive or negative number, explain in Comments): **This item will be automatically calculated.** If an adjustment has been calculated (either a positive or negative number) explain in Comments with the precise reason(s) for the change. An adjustment is only calculated when last month's Item 10 is not exactly the same number as this month's Item 6. If there is no adjustment, a zero will display in this cell. [Cell 21 and Cell 22]
7. Cases added during month (Sum of Items 7a, 7b, 7c and 7d): **This item will be automatically calculated.** This is the sum of Items 7a, 7b, 7c and 7d. Cell 23 is the sum of Cells 31, 33, 35 and 37. Cell 24 is the sum of Cells 32, 34, 36 and 38. [Cell 23 and Cell 24]
- a. Applications approved during the month (Same as Item 4a): **Cells 31 and 32 will be automatically calculated. Complete Cells 25, 26, 27, 28, 29 and 30.**
- In Cells 25, 26, 27, 28, 29 and 30 enter the number of applications, by assistance classification and household type, approved for CalFresh during the report month.
 - Cell 31 is the total PACF Federal, Federal/State, and State cases. This is the sum of Cell 25, Cell 26 and Cell 27.
 - Cell 32 is the total NACF Federal, Federal/State and State cases. This is the sum of Cell 28, Cell 29 and Cell 30.
- [Cell 25, Cell 26, Cell 27, Cell 28, Cell 29, Cell 30, Cell 31 and Cell 32]
- b. Change in assistance status from PACF or NACF during the month: Enter the number of certified households in the appropriate column whose assistance classification was changed from the previous report month from NACF to PACF or vice versa and are added to the new classification caseload. These cases will not be counted in Items 2, 4a and 7a. For example, on June 15 the household classification is changed from PACF to NACF, effective July 1. The June report will carry forward the case as PACF, then the July report will reflect the transfer in assistance classification in the PACF and NACF column and will carry forward the case as NACF. Only net changes should be reported. If there are multiple changes between NACF and PACF during the month but at the end of the report month the classification for the next month is the same as the classification for the report month, no change in assistance classification is listed in Item 7b. [Cell 33 and Cell 34]

ITEM INSTRUCTIONS (Continued)

- c. Inter-County Transfers received during the month: Enter the number of incoming cases (households) by assistance classification from another county for which your county accepted responsibility and provided benefits for the report month. [Cell 35 and Cell 36]
- d. Other approvals during the month: Enter the number of cases approved during the report month for reasons other than Items 7a, 7b and 7c, such as extended filing date or good cause. [Cell 37 and Cell 38]
8. Total cases open during the month (Certified eligible to participate during the month) (Item 6 plus Item 7. Also sum of Items 8a, 8b, 8c, and 8d): ***This item will be automatically calculated.*** This is the number of cases (households) by assistance classification that were certified eligible to participate during the report month. This is the sum of Item 6 and Item 7. It is also the sum of Items 8a, 8b, 8c and 8d. [Cell 39 and Cell 40]
- a. Pure federal cases: Enter the number of cases that consist entirely of federally eligible persons that were certified eligible to participate during the month. [Cell 41 and Cell 42]
- 1) Federal persons in Item 8a cases plus federal persons in Item 8b cases: Enter in Cell 43 (Federal Persons) the number of federal **persons** certified eligible in the cases entered in Cells 41, 42, 46 and 47. [Cell 43]
- b. Federal/State combined cases:
- Enter in Cell 44 (State Persons – Singles) the number of state **persons** in the cases entered in Cells 46 and 47 that are 18 years of age and older who have no dependent children. [Cell 44]
- Enter in Cell 45 (State Persons – Families) the number of state **persons** in the cases entered in Cells 46 and 47 that include dependent children. [Cell 45]
- Enter in Cells 46 and 47 (Federal/State combined cases) the number of cases that consist of federal and state eligible persons that were certified eligible to participate. [Cells 46 and 47]
- c. Pure state cases:
- Enter in Cell 48 (State Persons – Singles) the number of state **persons** in the cases entered in Cells 50 and 51 who are 18 years of age and older who have no dependent child/children. [Cell 48]
- Enter in Cell 49 (State Persons – Families) the number of state **persons** in the cases entered in Cells 50 and 51 that include dependent children. [Cell 49]
- Enter in Cells 50 and 51 (Pure state cases) the number of cases that consist entirely of state eligible persons that were certified eligible to participate. [Cell 50 and Cell 51]
- d. Restoration cases with benefits pro-rated during the month: Only households whose allotments are discontinued by the county and then restored pursuant to FNS Waiver #2090046 during the month should be reported here. [Cell 52]
9. Cases terminated during the month: Enter the number of cases terminated or removed from certification during the month by assistance classification including cases transferring to another county. This should be an unduplicated count of cases terminated during the month. [Cell 53 and Cell 54]

ITEM INSTRUCTIONS (Continued)

10. Cases pending at the end of the month (Item 8 minus Item 9): ***This item will be automatically calculated.*** This is the number of cases pending at the end of the month. It is the sum of Item 8 plus Item 9. This count will be entered in next month's report in Item 6a (Cells 19 and 20).
[Cell 55 and Cell 56]

PART C. RECERTIFICATIONS

11. Recertifications disposed of during the month (Item 11a plus 11b): ***This item will be automatically calculated.*** This is the sum of Item 11a and 11b by assistance classification and should include all recertifications including Transitional CalFresh recertifications.
- Cell 57 is the sum of Cells 65 and 73.
 - Cell 58 is the sum of Cell 66 and 74.
- [Cell 57 and Cell 58]
- a. Determined continuing eligible: ***Cells 65 and 66 will be automatically calculated. Complete Cells 59, 60, 61, 62, 63 and 64.***
- In Cells 59, 60, 61, 62, 63 and 64 enter the number of households that were determined to be eligible for continued participation during the report month including Transitional CalFresh households.
 - Cell 65 is the total PACF Federal, Federal/State and State households. This is the sum of Cells 59, Cell 60 and Cell 61, **and is automatically calculated.**
 - Cell 66 is the total NACF Federal, Federal/State and State households. This is the sum of Cells 62, Cell 63 and Cell 64, **and is automatically calculated.**
- [Cells 59, 60, 61, 62, 63, 64, 65 and 66]
- b. Determined ineligible: ***Complete Cells 67, 68, 69, 70, 71 and 72.***
- In Cells 67, 68, 69, 70, 71 and 72 enter the number of households that were determined to be ineligible for continued participation during the month including Transitional CalFresh households.
 - Cell 73 is the total PACF Federal, Federal/State and State households. This is the sum of Cells 67, Cell 68 and Cell 69, **and is automatically calculated.**
 - Cell 74 is the total NACF Federal, Federal/State and State households. This is the sum of Cells 70, Cell 71 and Cell 72, **and is automatically calculated.**
- [Cells 67, 68, 69, 70, 71, 72, 73 and 74]
12. Overdue recertifications (CWD caused) during the month: Enter the number of households reported in Item 11a and Item 11b by assistance classification that reapplied prior to the end of their current recertification period, but were not processed within required timeframes due to CWD error. Households that reapply before the end of their certification period will be reported under Item 11. Households that reapply any time following the end of their certification period will be reported under Part A. [Cell 75 and Cell 76]

COMMENTS

Use the Comments section to:

- Explain any "0" data entry for an item if the county does not provide the service/activity or if the county is unable to collect or track the data.
- Explain any adjustment entries (Item 1b/Cell 3 and Item 6b/Cells 21 and 22).
- Explain any major fluctuations in data.
- Provide information as directed in the report instructions.
- Provide any other comments the county determines necessary.

CALFRESH MONTHLY CASELOAD MOVEMENT STATISTICAL REPORT

DFA 296

VALIDATION RULES AND EDITS

Cell 1 - 76 Each data cell in this report must be a whole number equal to or greater than zero (0), except Item 1b (Cell 3), Item 6b (Cells 21 and 22) and Item 7b (Cells 33 and 34) which may be either a positive or negative number. Enter no decimals. No data cells should be left blank.

PART A. APPLICATIONS FOR CALFRESH

CELL 2: Cell 2 must be equal to Cell 16 in last month's report
CELL 3: Cell 3 must be equal to (Cell 1 minus Cell 2) (positive or negative number)
CELL 5: Cell 5 must be equal to (Cell 1 plus Cell 4)
CELL 6: Cell 6 must be equal to (Cell 7 plus Cell 10 plus Cell 11 plus Cell 14 plus Cell 15)
CELL 7: Cell 7 must be equal to (Cell 31 plus Cell 32)
CELL 8: Cell 8 must be less than or equal to Cell 31
CELL 9: Cell 9 must be less than or equal to Cell 32
CELL 12: Cell 12 must be less than or equal to Cell 10
CELL 13: Cell 13 must be less than or equal to Cell 11
CELL 16: Cell 16 must be equal to (Cell 5 minus Cell 6)

NOTE: Cell 16 to be entered in Cell 2 in next month's report

PART B. CERTIFIED CASELOAD MOVEMENT

CELL 19: Cell 19 must be equal to Cell 55 from last month's report
CELL 20: Cell 20 must be equal to Cell 56 from last month's report
CELL 21: Cell 21 must be equal to (Cell 17 minus Cell 19) (positive or negative number)
CELL 22: Cell 22 must be equal to (Cell 18 minus Cell 20) (positive or negative number)
CELL 23: Cell 23 must be equal to (Cell 31 plus Cell 33 plus Cell 35 plus Cell 37)
CELL 24: Cell 24 must be equal to (Cell 32 plus Cell 34 plus Cell 36 plus Cell 38)
CELL 31: Cell 31 must be equal to (Cell 25 plus Cell 26 plus Cell 27)
CELL 32: Cell 32 must be equal to (Cell 28 plus Cell 29 plus Cell 30)
CELL 33: Cell 33 may be a positive or negative number
CELL 34: Cell 34 may be a positive or negative number
CELL 39: Cell 39 must be equal to (Cell 17 plus Cell 23 AND
 Cell 39 must be equal to (Cell 41 plus Cell 46 plus Cell 50)
CELL 40: Cell 40 must be equal to (Cell 18 plus Cell 24 AND
 Cell 40 must be equal to (Cell 42 plus Cell 47 plus Cell 51 plus Cell 52)
CELL 43: Cell 43 must be greater than or equal to the sum of (Cell 41 plus Cell 42 plus Cell 46 plus Cell 47)
CELL 44: (Cell 44 plus Cell 45) must be greater than or equal to (Cell 46 plus Cell 47)
 (Cell 44 plus Cell 45) must be zero if (Cell 46 plus Cell 47) is zero.
CELL 45: (Cell 44 plus Cell 45) must be greater than or equal to (Cell 46 plus Cell 47)
 (Cell 44 plus Cell 45) must be zero if (Cell 46 plus Cell 47) is zero.
CELL 48: (Cell 48 plus Cell 49) must be greater than or equal to (Cell 50 plus Cell 51)
 (Cell 48 plus Cell 49) must be zero if (Cell 50 plus Cell 51) is zero.
CELL 49: (Cell 48 plus Cell 49) must be greater than or equal to (Cell 50 plus Cell 51)
 (Cell 48 plus Cell 49) must be zero if (Cell 50 plus Cell 51) is zero.
CELL 55: Cell 55 must equal to (Cell 39 minus Cell 53)
NOTE: Cell 55 to be entered in Cell 19 in next month's report
CELL 56: Cell 56 must equal to (Cell 40 minus Cell 54)
NOTE: Cell 56 to be entered in Cell 20 in next month's report

PART C. RECERTIFICATIONS

CELL 57: Cell 57 must be equal to (Cell 65 plus Cell 73)
CELL 58: Cell 58 must be equal to (Cell 66 plus Cell 74)
CELL 65: Cell 65 must be equal to (Cell 59 plus Cell 60 plus Cell 61)
CELL 66: Cell 66 must be equal to (Cell 62 plus Cell 63 plus Cell 64)
CELL 73: Cell 73 must be equal to (Cell 67 plus Cell 68 plus Cell 69)
CELL 74: Cell 74 must be equal to (Cell 70 plus Cell 71 plus Cell 72)
CELL 75: Cell 75 must be less or equal to Cell 55
CELL 76: Cell 76 must be less or equal to Cell 56