

DEPARTMENT OF BENEFIT PAYMENTS

744 P Street, Sacramento 95814



August 6, 1976

ALL-COUNTY LETTER NO. 76-109

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: REVISIONS TO FOOD STAMP OUTREACH PROGRAM REPORT DFA 433

REFERENCE:

Attached is the revised form, including instructions, for the monthly report on Food Stamp Outreach Program (Form DFA 433). This revision reflects a shift in many Outreach responsibilities from the counties to the state, effective July 1, 1976. The revised form is to be used starting with the July 1976 report month, to be submitted by August 20, 1976.

The State Economic Opportunity Office (SEOO) has assumed responsibility for a statewide Outreach Program. Therefore, Outreach methods used, news media contacts, cooperative/noncooperative organizations and roadblocks to participation will no longer be reported by the county welfare departments. Other report items required by the U.S. Department of Agriculture, Food and Nutrition Service (FNS), however, will continue to be submitted by the county welfare departments to the State Outreach Coordinator. Reasons for nonparticipation of certified households and reasons for significant caseload changes must be reported monthly. Estimates of population and potentially eligible food stamp recipients must be submitted with the March, June, September, and December reports.

A supply of the revised form can be ordered without cost from the Department of Benefit Payments warehouse.

Any questions regarding this report should be directed to David Watanabe, Food Stamp Outreach Coordinator, at (916) 322-4403.

Sincerely,

A handwritten signature in black ink, appearing to read "G. Adams", written over a horizontal line.

GARY G. ADAMS
Deputy Director

cc: CWDA

Attachments

GEN 654 (2/75)

Send one copy to:

Monthly Report on
 FOOD STAMP OUTREACH PROGRAM

Food Stamp Outreach Coordinator
 Department of Benefit Payments
 744 P Street, Mail Station 15-53
 Sacramento, California 95814

This report is to be received in Sacramento on or before the twentieth calendar day of the month following the report month. Retain one copy in county files.

Reporting period

County

Part A. Reasons for Nonparticipation of Certified Public Assistance and Nonassistance Households

List the reasons for nonparticipation of certified eligible PA and NA households that were issued ATP's for the report month but failed to redeem them. Do not include Public Assistance Withholding (PAW) households.

Reasons for nonparticipation among PA households.	Explain how reasons were ascertained.
1.	
2.	
3.	
4.	

Part A. (continued)

Reasons for nonparticipation among NA households.

Explain how reasons were ascertained.

1.

2.

3.

4.

Part B. Reasons for Significant Caseload Changes

Explain any significant change in the number of Food Stamp households since the previous reporting period. For this report, an increase or decrease of fifteen percent or more will be considered significant.

Part C. Population and Potent: Food Stamp Eligibles

This part is to be reported quarterly. Report data in March, June, September and December each year. The figures estimated by the Department of Benefit Payments or those estimated by the reporting county are to be listed in Items 1-3.

1. Estimated total county population.	
2. Estimated number of persons eligible for Food Stamp benefits.	
3. Estimated number of households eligible for Food Stamp benefits.	

Methodology used for county estimates of potential eligibles:

Completed by:	Telephone number	Completion date
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