

State of California  
Department of Social Services

Noa Msg Doc No: M40-107 j  
Action : Partial Approval  
Issue: CalWORKs 60-Month Time Limit  
Title : Timed-Out Adult

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Auto ID No.:  
Source :  
Issued by :  
Reg Cite : 40-107.141, 40-171, 40-173, 42-302,  
42-302.21, 42-712, and 82-833

Use Form No. : NA 530, attach NA 531  
Original Date : 11-01-02, New  
Revision Date :

MESSAGE:

在 \_\_\_\_\_, 郡政府已批准給你家中一些成員現金補助及加州醫藥補助計畫 (Medi-Cal) 福利。現金補助的第一天是 \_\_\_\_\_。第一個月的現金補助金額是\$ \_\_\_\_\_。

給 \_\_\_\_\_ 和 \_\_\_\_\_ 的補助已被否決。

原因如下：

郡政府確定，在最近一次時間限制通知發出的日期 \_\_\_\_\_ 時，你已使用了總共60個月的現金補助，因此你不能繼續領取現金補助。

你現金補助金額的核算在下一頁上列出。

INSTRUCTIONS: Use to approve cash aid and deny any member(s) of the AU who is a CalWORKs timed-out adult.

Complete the following:

- Date of notification.
- First day of cash aid.
- First month's cash aid amount.
- Name of adult(s) that is timed-out.
- Date of previous NOA that indicated 60 months were used.
- Use NA 531 to show the cash grant amount without CalWORKs timed-out adult.

(Chinese)