

Send one copy to: California Department of Social Services  
 Data Systems and Survey Design Bureau, M.S. 9-081  
 P.O. Box 944243  
 Sacramento, CA 94244-2430  
**FAX: (916) 657-2074**

# FOOD STAMP PROGRAM MONTHLY CASELOAD MOVEMENT STATISTICAL REPORT

Fiscal Report Month - Cut off Date \_\_\_\_\_

Calendar Report Month

COUNTY	COUNTY CODE
REPORT MONTH AND YEAR	

**PART A. APPLICATIONS FOR FOOD STAMPS**

1. Pending from last month (Item 5 last month, or explain).....			01
2. Received during month.....			02
3. Total during the month (Sum of 1 and 2).....			03
4. Disposed of during month (Sum of a, b, and c below).....			04
	TOTAL		
a. Total approved (Same as Part B, 7a).....			05
	PAFS	NAFS	
(1) In over 30 days (CWD caused).....	06	07	
	PAFS	NAFS	
b. Denied.....			08
	PAFS	NAFS	
(1) In over 30 days (CWD caused).....	10	11	
	PAFS	NAFS	
c. Withdrawn.....			12
	PAFS	NAFS	
5. Applications pending at end of month (3 minus 4 above).....			14

**PART B. CERTIFIED CASELOAD MOVEMENT**

						PAFS	NAFS
6. Cases brought forward from last month (item 10 last month or explain).....						15	16
7. Cases added during month (Sum of a, b, and c, below).....						17	18
	PAFS			NAFS			
	Federal	Fed/State	State	Federal	Fed/State	State	
a. Applications approved.....	19	20	21	22	23	24	25
b. Transfer in assistance classification from PAFS or NAFS.....						27	28
c. Other approvals.....						29	30
8. Total cases open during month (Certified eligible to participate during the report month) (Sum of 6 and 7 above and also the sum of a, b, and c below).....						31	32
a. Pure federal cases.....						33	34
1. Federal persons in 8a. Cases plus federal persons in 8b cases.....	FEDERAL PERSONS			STATE PERSONS COUNT			
	35			Singles	Families		
b. Federal/State combined cases.....				36	37		38
c. Pure state cases.....				40	41		42
9. Cases terminated during the report month.....						44	45
10. Cases carried forward to next month (8 minus 9).....						46	47

**PART C. RECERTIFICATIONS**

11. Number of recertifications disposed of during the report month (sum of a and b, below).....						48	49
	PAFS			NAFS			
	Federal	Federal/State	State	Federal	Federal/State	State	
a. Determined continuing eligible.....	50	51	52	53	54	55	56
b. Determined ineligible.....	58	59	60	61	62	63	64
12. Overdue recertifications (CWD caused).....						66	67

**COMMENTS:**

REPORT PREPARED BY:	TELEPHONE	DATE
	( )	

**DFA 296 (1/99) INSTRUCTIONS**  
*(ACL 97-77 [12-11-97] as revised by ACL 99-06 [1-25-99])*

The DFA 296 is due by the 20<sup>th</sup> day following the last day of the report month. These reports should be mailed to the address listed below or faxed to (916) 657-2074:

California Department of Social Services  
Data Systems and Survey Design Bureau, MS 9-081  
P.O. Box 944243  
Sacramento, CA 94244-2430

**PART A. APPLICATIONS FOR FOOD STAMPS**

Part A summarizes activity during the report month with respect to food stamp applications. A request for food stamps is a signed application that has been received by the appropriate food stamp office. For purposes of this report, "cases" and "households" are interchangeable.

Applications for recertification received in the last month of certification are not to be reported in this section. Applications for recertification received after this time are to be reported as new applications.

1. **Pending from last month** – Enter the number of food stamp applications pending from the previous month. The entry should equal Item 5 of the previous month's report or be explained in the Comments section.
2. **Received during the month** – Enter the number of new applications received during the report month. Do not include recertifications or applications for restored benefits not mandated by a court order.
3. **Total during the month** – Enter the sum of Items 1 and 2.
4. **Disposed of during the month** – Enter the sum of 4a, 4b and 4c.
  - a. **Total approved** – Enter the number of applications approved by county action for food stamps during the report month. The entry will equal Item 7a.
    - (1) **In over 30 days (CWD caused)** – Enter the number of application approvals reported in Item 4a (approvals) which were processed in over 30 days due to CWD error. Provide information for both public assistance (PAFS) and nonassistance (NAFS) households.
  - b. **Denied** – Enter the number of applications denied by county action during the report month. Provide information for both PAFS and NAFS households.
    - (1) **In over 30 days (CWD caused)** – Enter the number of application denials reported in 4b (denials) which were processed in over 30 days due to CWD error. Provide information for both PAFS and NAFS households.
  - c. **Withdrawn** – Enter the total number of applications, by assistance classification, voluntarily withdrawn by the applicant household.
5. **Applications pending at end of month** – Enter the number of applications pending at the end of the month. Entry will equal the difference between total applications in Item 3 minus the number disposed in Item 4.

## PART B. CERTIFIED CASELOAD MOVEMENT

6. **Cases brought forward from last month** – Enter the number of cases in Item 10 from the previous month's report. If different from the previous month's report, explain in the Comments section.
7. **Cases added during month** – Enter the sum of Items 7a, 7b and 7c.
  - a. **Applications approved** – Enter the number of applications, by assistance classification and household type, approved for food stamps during the report month. Enter the total PAFS Federal, Federal/State, and State cases in Cell 25. This is the sum of Cell 19, Cell 20 and Cell 21. Enter the total NAFS Federal, Federal/State and State cases in Cell 26. This is the sum of Cell 22, Cell 23 and Cell 24.
  - b. **Transfer in assistance classification from PAFS or NAFS** – Enter the number of certified households in the appropriate column whose assistance classification was changed during the report month from NAFS to PAFS or vice versa and are added to the new classification caseload. These cases will not be counted in Items 2, 4a or 7a. Only net changes should be reported. If there are multiple changes between NAFS and PAFS during the month but the end result is that there is no change in status for the case, no change is listed in 7b.
  - c. **Other approvals** – Enter the number of cases approved during the report month for reasons other than Items 7a and 7b.
8. **Total cases open during month** – Enter 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 above, and also the sum of Items a, b and c, below.
  - a. **Pure federal cases** - Enter in cells 33 and 34 the number of cases that consist entirely of federally eligible persons that were certified eligible to participate during the report month.
    - (1) Enter in cell 35 (FEDERAL PERSONS) the total number of federal persons certified eligible in the cases entered in cells 33 and 34 (8a - Pure federal cases) and cells 38 and 39 (8b - Federal/State combined cases).
  - b. **Federal/State combined cases** - Enter in cell 36 (STATE PERSONS COUNT - Singles) the number of state persons in cells 38 and 39 (Federal/State combined cases) that are 18 years of age and older who have no dependent child/children.

Enter in cell 37 (STATE PERSONS COUNT – Families) the number of state persons in families that include dependent children.

Enter in cells 38 and 39 (Federal/State combined cases) the number of cases that consist of federal and state eligible persons that were certified eligible to participate during the report month.
  - c. **Pure state cases** - Enter in cell 40 (STATE PERSONS COUNT – Singles) the number of state persons in the state cases that are 18 years of age and older who have no dependent child/children.

Enter in cell 41 (STATE PERSONS COUNT – Families) the number of state persons in families that include dependent children.

Enter in cells 42 and 43 (Pure state cases) the number of cases that consist entirely of state eligible persons that were certified eligible to participate during the report month.

9. **Cases terminated during the report month** – Enter the number of cases terminated or removed from certification during the report month by assistance classification. This should be an unduplicated count of cases terminated during the report month.
10. **Cases carried forward to next month** – Enter the number of cases carried forward to the next month. Item 8 minus Item 9.

#### **PART C. RECERTIFICATIONS**

11. **Number of recertifications disposed of during the report month** – Enter the sum of 11a and 11b by assistance classification. Cell 48 is the sum of Cell 56 and 64. Cell 49 is the sum of Cell 57 and Cell 65.
  - a. **Determined continuing eligible** – Enter the number of households that were determined to be eligible for continued participation during the report month. Enter the total PAFS Federal, Federal/State and State households in Cell 56. This is the sum of Cell 50, Cell 51 and Cell 52. Enter the total NAFS Federal, Federal/State and State households in Cell 57. This is the sum of Cell 53, Cell 54 and Cell 55.
  - b. **Determined ineligible** – Enter the number of households that were determined to be ineligible for continued participation during the report month. Enter the total PAFS Federal, Federal/State and State households in Cell 64. This is the sum of Cell 58, Cell 59 and Cell 60. Enter the total NAFS Federal, Federal/State and State households in Cell 65. This is the sum of Cell 61, Cell 62 and Cell 63.
12. **Overdue recertifications (CWD caused)** – 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.

**COMMENTS** – This section is reserved to explain any discrepancies and for additional information required as a result of a court decision or change in legislation or regulation.