

State of California
Department of Social Services

Noa Msg Doc No.: M40-181A Page 1 of 1
Action : Discontinue
Issue: Application Processing
Title: SAWS 2 Plus Redetermination/
Other Essential Information
Use Form No. : NA 290
Original Date : 05-01-87
Revision Date : 11-01-14

Auto ID No.:
Source :
Issued by : ACL 14-88
Reg Cite : 40-105.1, 40-181.2; .3

MESSAGE:

A partir de _____, el Condado va a
descontinuar su asistencia monetaria.

La razón es la siguiente:

Necesitamos cierta información para verificar
su elegibilidad. Le pedimos a usted que:

_____.

Usted no hizo esto y no pidió ayuda al
Condado para obtener las pruebas que
necesitamos.

INSTRUCTIONS: Use to discontinue cash aid when necessary evidence/information
required during redetermination, or that is essential at another time is not
provided and the client did not ask the County for help getting the proof.
Specify what the recipient was required to do and the additional regulation
cites.

Example: "We asked you to fill out a CW 25A, Payee Consent Agreement and return
it by November 7." 89-201.42

This message replaces M40-181A dated 01-08-02.

SPANISH

