



CDSS

WILL LIGHTBOURNE
DIRECTOR

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

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EDMUND G. BROWN JR.
GOVERNOR

August 9, 2012

ERRATA

ALL COUNTY LETTER NO: 12-09E

REASON FOR THIS TRANSMITTAL

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

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

SUBJECT: CORRECTIONS TO ALL COUNTY LETTER (ACL) 12-09,
REVISED CALFRESH MONTHLY CASELOAD MOVEMENT
STATISTICAL REPORT [DFA 296 (1/12)]

The purpose of this errata is to correct an error on the DFA 296, CalFresh Monthly Caseload Movement Statistical Report form, instructions, and validations. These changes include:

- Item 8d (Cell 52) “Restoration cases with benefits pro-rated during the month” was renamed for clarity and has been moved to Item 7d (Cell 37). The instructions, cell numbers, and validations have also been updated to reflect this change.
- The word “pending” in Items 6 and 10 has been changed to “brought forward” to more accurately reflect the status of those cases.
- A typographical error in the instructions for Item 10 was corrected. The word “plus” has been changed to “minus” to more accurately reflect the calculation of the cells.
- In addition in preparation for the implementation of Assembly Bill 959 (Chapter 506, Statutes of 2011), Cell 37 will no longer be shaded. Please refer to ACL 12-35, dated July 30, 2012, for further clarification.

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Page Two

Counties are required to use the revised DFA 296 (1/12) beginning with the report month of January 2012 and to 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. Data for the months of January through July 2012 must be submitted no later than October 19, 2012.

To complete the electronic form, counties are to 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. For reference purposes, attached please find a copy of the DFA 296 form, instructions and validations.

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 county contact or by calling the CalFresh Policy Bureau at (916) 654-1896.

Sincerely,

Original Document Signed By:

M. AKHTAR KHAN, Ph.D., Chief
Branch Chief
Research Services Branch

Attachments

**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 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.

Reinstatement of Eligibility and Prorated Benefits: Households whose eligibility is discontinued by the county and then reinstated with pro-rated benefits pursuant to FNS waiver #2090046 (ACL 10-32, dated July 23, 2010). PACF cases whose benefits are being restored within 30 days of discontinuance due to a late QR7 should also be reported here.

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**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 brought forward at the beginning of the month: Enter the number of cases brought forward 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 brought forward 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, 7d and 7e): ***This item will be automatically calculated.*** This is the sum of Items 7a, 7b, 7c, 7d and 7e. Cell 23 is the sum of Cells 31, 33, 35, 37 and 39. Cell 24 is the sum of Cells 32, 34, 36, 38 and 40. [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. Cases with eligibility reinstated and benefits pro-rated during the month: Only households whose eligibility is discontinued by the county and then reinstated with benefits pro-rated pursuant to FNS Waiver #2090046 during the month should be reported here. PACF cases whose benefits are being restored within 30 days of discontinuance should also be reported here. Cases with ongoing eligibility but reduced benefits that are later restored should not be counted here. *[Cell 37 and Cell 38]*
- e. Other approvals during the month: Enter the number of cases approved during the report month for reasons other than Items 7a, 7b, 7c and 7d, such as extended filing date or good cause. *[Cell 39 and Cell 40]*
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 and 8c.): ***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 and 8c. *[Cell 41 and Cell 42]*
- 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 43 and Cell 44]*
- 1) Federal persons in Item 8a cases plus federal persons in Item 8b cases: Enter in Cell 45 (Federal Persons) the number of federal **persons** certified eligible in the cases entered in Cells 43, 44, 48 and 49. *[Cell 45]*
- b. Federal/State combined cases:
- Enter in Cell 46 (State Persons – Singles) the number of state **persons** in the cases entered in Cells 48 and 49 that are 18 years of age and older who have no dependent children. *[Cell 46]*
- Enter in Cell 47 (State Persons – Families) the number of state **persons** in the cases entered in Cells 48 and 49 that include dependent children. *[Cell 47]*
- Enter in Cells 48 and 49 (Federal/State combined cases) the number of cases that consist of federal and state eligible persons that were certified eligible to participate. *[Cells 48 and 49]*
- c. Pure state cases:
- Enter in Cell 50 (State Persons – Singles) the number of state **persons** in the cases entered in Cells 52 and 53 who are 18 years of age and older who have no dependent child/children. *[Cell 50]*
- Enter in Cell 51 (State Persons – Families) the number of state **persons** in the cases entered in Cells 52 and 53 that include dependent children. *[Cell 51]*
- Enter in Cells 52 and 53 (Pure state cases) the number of cases that consist entirely of state eligible persons that were certified eligible to participate. *[Cell 52 and Cell 53]*

ITEM INSTRUCTIONS (Continued)

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 54 and Cell 55]
10. Cases brought forward at the end of the month (Item 8 minus Item 9): ***This item will be automatically calculated.*** This is the number of cases brought forward at the end of the month. It is the difference between Item 8 minus Item 9. This count will be entered in next month's report in Item 6a (Cells 19 and 20). [Cell 56 and Cell 57]

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 58 is the sum of Cells 66 and 74.
 - Cell 59 is the sum of Cell 67 and 75.
- [Cell 58 and Cell 59]
- a. Determined continuing eligible: ***Cells 66 and 67 will be automatically calculated. Complete Cells 60, 61, 62, 63, 64 and 65.***
- In Cells 60, 61, 62, 63, 64 and 65 enter the number of households that were determined to be eligible for continued participation during the report month including Transitional CalFresh households.
 - Cell 66 is the total PACF Federal, Federal/State and State households. This is the sum of Cells 60, Cell 61 and Cell 62, **and is automatically calculated.**
 - Cell 67 is the total NACF Federal, Federal/State and State households. This is the sum of Cells 63, Cell 64 and Cell 65, **and is automatically calculated.**
- [Cells 60, 61, 62, 63, 64, 65, 66 and 67]
- b. Determined ineligible: ***Complete Cells 68, 69, 70, 71, 72 and 73.***
- In Cells 68, 69, 70, 71, 72 and 73 enter the number of households that were determined to be ineligible for continued participation during the month including Transitional CalFresh households.
 - Cell 74 is the total PACF Federal, Federal/State and State households. This is the sum of Cells 68, Cell 69 and Cell 70, **and is automatically calculated.**
 - Cell 75 is the total NACF Federal, Federal/State and State households. This is the sum of Cells 71, Cell 72 and Cell 73, **and is automatically calculated.**
- [Cells 68, 69, 70, 71, 72, 73, 74 and 75]
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 76 and Cell 77]

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

CELLS 1 - 77

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.

Initial reports: If "Initial" is selected, the "Revised Report Explanation" box near the bottom of the report form must be left blank.

Revised reports: If "Revised" is selected, enter the reasons for the revision in the "Revised Report Explanation" box near the bottom of the report form.

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) If Cell 3 is not 0, explain the reason for the adjustment in the "Item 1b (Cell 3) Explanation" box If Cell 3 is 0, the "Item 1b (Cell 3) Explanation" box must be blank
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) If Cell 21 is not 0, explain the reason for the adjustment in the "Item 6b PACF (Cell 21) Explanation" box If Cell 21 is 0, the "Item 6b PACF (Cell 21) Explanation" box must be blank
Cell 22	Cell 22 must be equal to (Cell 18 minus Cell 20) (positive or negative number) If Cell 22 is not 0, explain the reason for the adjustment in the "Item 6b NACF (Cell 22) Explanation" box If Cell 22 is 0, the "Item 6b PACF (Cell 22) Explanation" box must be blank
Cell 23	Cell 23 must be equal to (Cell 31 plus Cell 33 plus Cell 35 plus Cell 37 plus Cell 39)
Cell 24	Cell 24 must be equal to (Cell 32 plus Cell 34 plus Cell 36 plus Cell 38 plus Cell 40)
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 41	Cell 41 must be equal to (Cell 17 plus Cell 23 AND Cell 41 must be equal to (Cell 43 plus Cell 48 plus Cell 52)
Cell 42	Cell 42 must be equal to (Cell 18 plus Cell 24 AND Cell 42 must be equal to (Cell 44 plus Cell 49 plus Cell 53)
Cell 43	Cell 45 must be zero if the sum of (Cell 43 plus Cell 44 plus Cell 48 plus Cell 49) is zero.
Cell 44	Cell 45 must be zero if the sum of (Cell 43 plus Cell 44 plus Cell 48 plus Cell 49) is zero.
Cell 45	Cell 45 must be greater than or equal to the sum of (Cell 43 plus Cell 44 plus Cell 48 plus Cell 49) Cell 45 must be zero if the sum of (Cell 43 plus Cell 44 plus Cell 48 plus Cell 49) is zero.
Cell 46	(Cell 46 plus Cell 47) must be greater than or equal to (Cell 48 plus Cell 49) (Cell 46 plus Cell 47) must be zero if (Cell 48 plus Cell 49) is zero.
Cell 47	(Cell 46 plus Cell 47) must be greater than or equal to (Cell 48 plus Cell 49) (Cell 46 plus Cell 47) must be zero if (Cell 48 plus Cell 49) is zero.
Cell 48	(Cell 46 plus Cell 47) must be greater than or equal to (Cell 48 plus Cell 49) (Cell 46 plus Cell 47) must be zero if (Cell 48 plus Cell 49) is zero. Cell 45 must be zero if the sum of (Cell 43 plus Cell 44 plus Cell 48 plus Cell 49) is zero.
Cell 49	(Cell 46 plus Cell 47) must be greater than or equal to (Cell 48 plus Cell 49) (Cell 46 plus Cell 47) must be zero if (Cell 48 plus Cell 49) is zero. Cell 45 must be zero if the sum of (Cell 43 plus Cell 44 plus Cell 48 plus Cell 49) is zero.
Cell 50	(Cell 50 plus Cell 51) must be greater than or equal to (Cell 52 plus Cell 53) (Cell 50 plus Cell 51) must be zero if (Cell 52 plus Cell 53) is zero.
Cell 51	(Cell 50 plus Cell 51) must be greater than or equal to (Cell 52 plus Cell 53) (Cell 50 plus Cell 51) must be zero if (Cell 52 plus Cell 53) is zero.
Cell 52	(Cell 50 plus Cell 51) must be greater than or equal to (Cell 52 plus Cell 53) (Cell 50 plus Cell 51) must be zero if (Cell 52 plus Cell 53) is zero.
Cell 53	(Cell 50 plus Cell 51) must be greater than or equal to (Cell 52 plus Cell 53) (Cell 50 plus Cell 51) must be zero if (Cell 52 plus Cell 53) is zero.
Cell 56	Cell 56 must equal to (Cell 41 minus Cell 54) NOTE: Cell 56 to be entered in Cell 19 in next month's report
Cell 57	Cell 57 must equal to (Cell 42 minus Cell 55) NOTE: Cell 57 to be entered in Cell 20 in next month's report

PART C. RECERTIFICATIONS

Cell 58	Cell 58 must be equal to (Cell 66 plus Cell 74)
Cell 59	Cell 59 must be equal to (Cell 67 plus Cell 75)
Cell 66	Cell 66 must be equal to (Cell 60 plus Cell 61 plus Cell 62)
Cell 67	Cell 67 must be equal to (Cell 63 plus Cell 64 plus Cell 65)
Cell 74	Cell 74 must be equal to (Cell 68 plus Cell 69 plus Cell 70)
Cell 75	Cell 75 must be equal to (Cell 71 plus Cell 72 plus Cell 73)
Cell 76	Cell 76 must be less or equal to Cell 56
Cell 77	Cell 77 must be less or equal to Cell 57