



# CalFresh Clinics



## At the FRC

(Formerly known as Food Stamps)

Effective February 2011

**Free application assistance is available at:**

### FRC

39155 Liberty St  
Fremont, Calif.

**Call**

**574-2000**

**to set up your 20-minute appointment**

**Translation Services Available For Your Appointment**



**If you are working or unemployed, you and your family may qualify for CalFresh assistance!**

In Alameda County, assistance comes in the form of a debit card. It can be used instead of cash to pay for food in most stores.

### To qualify for CalFresh, you need to:

- Have at least one U.S. citizen or legal permanent resident in your household.
- Meet the gross monthly income limits as listed on the back (e.g. \$1,174 for one person, or up to \$2,389 for a family of four).
- Not be receiving SSI, Supplemental Security Income. (But if there are other household members living in the home who do not receive SSI, they may be eligible for CalFresh.)

### Please bring copies of the following documents to your appointment:

- I.D. card (any type is okay)
- Social Security Number for everyone in the household who has one
- Birth certificates for children living in the household
- Bank Account Statements (checking and/or savings)
- Proof of Income (check stubs or letter from employer)
- Proof of Expenses (rent, utilities, child care or child support)

Upon arrival for your appointment, please sign in at the FRC Welcome Center.

**1-800-870-3663**

Appointment Date \_\_\_\_\_ Time \_\_\_\_\_



## CalFresh Income Guidelines

Gross Income Limit (130% of Poverty Level)			Gross Income Limit for Elderly Disabled Persons when living with others (165% of Poverty Level)		
Household Size	Gross Monthly Limit*	Approximate Benefit Amount	Household Size	Gross Monthly Limit*	Approximate Benefit Amount
1	\$1,174	up to \$200	1	\$1,490	up to \$200
2	\$1,579	up to \$367	2	\$2,004	up to \$367
3	\$1,984	up to \$526	3	\$2,518	up to \$526
4	\$2,389	up to \$668	4	\$3,032	up to \$668
5	\$2,794	up to \$793	5	\$3,547	up to \$793
6	\$3,200	up to \$952	6	\$4,061	up to \$952
7	\$3,605	up to \$1,052	7	\$4,575	up to \$1,052
8	\$4,010	up to \$1,202	8	\$5,089	up to \$1,202
Add for each additional household member	+\$406	\$150	Add for each additional household member	+\$515	\$150

**\*Gross Monthly Income** includes all income sources for all household members (e.g. salary and wages, unemployment benefits, disability benefits, child support, alimony, etc.). All households must provide proof of income.

The numbers in this chart are based on the number of legal residents in the household. If your household contains both legal and undocumented residents, please call us to determine eligibility so we can calculate the modified income for your household and compare to the chart.



Your CalFresh benefit comes in the form of a debit card which is discreet and easy to use. Every month your benefit is automatically loaded onto your card. Just take it to the grocery store and use it to buy food!

