



# Application Assistance

(Formerly known as Food Stamps)  
Effective October 2017

Available at two locations — Fremont & Union City  
Schedule your appointment today!

**Application assistance is available at two locations:**

**FREMONT FAMILY RESOURCE CENTER**  
39155 Liberty St.  
Suite #A110  
Fremont, CA

**KIDS' ZONE**  
*At Barnard White Middle School Campus*  
725 Whipple Road  
Union City, CA

**Call 574-2000 to set up your appointment at either location**

You can also apply online or by phone. See other side for info.

This institution is an Equal Opportunity Provider & Employer.



**If you are working or unemployed, have low or no income, you and your family may qualify for CalFresh assistance!**

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
- Not be receiving Supplemental Security Income (SSI) (But if there are other household members living in the home who do not receive SSI, they may be eligible for CalFresh.)

**Please bring the following documents to your appointment:**

- **I.D. card** (any type is okay)
- **Social Security Number** for those in household who have 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, medical, child care or child support)

**Appointment:**

**Date** \_\_\_\_\_

**Time** \_\_\_\_\_



# CalFresh Gross Income Limit

200% of Poverty Level

October 1, 2017 – September 30, 2018

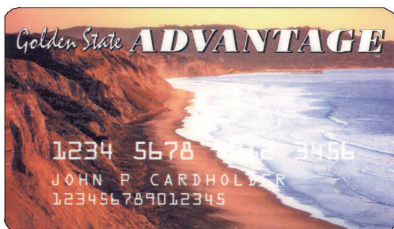
Household Size	Gross Monthly Income*	Approximate Monthly Benefit
1	\$2,010	Up to \$192
2	\$2,707	Up to \$352
3	\$3,404	Up to \$504
4	\$4,100	Up to \$640
5	\$4,796	Up to \$760
6	\$5,493	Up to \$913
7	\$6,190	Up to \$1,009
8	\$6,887	Up to \$1,153
For each add'l household member add:	+ \$698	+\$144

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

If your household has at least one person who is **age 60 or older, or who has a disability**, your income can be over the amounts listed in the chart. A few exceptions to these new guidelines apply. Please call us to find out if you might qualify.

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.

**\*NEW\*** You can now apply online for CalFresh benefits, as well as Medi-Cal and Cash Assistance programs. Apply at [www.MyBenefitsCalwin.org](http://www.MyBenefitsCalwin.org). Please enter the exact URL address. Have your documents handy so you can enter the requested info easily. Or, call the Alameda County Community Food Bank at 1-800-870-3663 or 510-635-3663.



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!

