

Submission Studio

Form Name: FNS-292B (4-11)
Form Description: Disaster Relief
Program: Disaster Supplemental Nutrition Assistance Program Benefit Issuance
State: CA
Agency Code: 0692501 **Agency Name:** CA Dept. of Social Services
Program Times: July 2014
Submission Type: Final **Revision:** 0
Submission Status: New Submission

4. DISASTER DATE	DISASTER NAME
<input type="text"/>	<input type="text"/>

5. BRIEF DESCRIPTION OF AREA AFFECTED (counties, cities, towns, zip codes, etc, located within area of disaster.)

6. PRESIDENTIAL DECLARATION

7. TYPE OF DISASTER

PRIMARY TYPE OF DISASTER

SECONDARY TYPE OF DISASTER

Flood
 Hurricane
 Other (Specify)

Tornado
 Winter Storm

Wild Fire

8. APPLICATION PERIOD (MM/DD/YYYY)

From: Through:

9. BENEFIT PERIOD OF ISSUANCE (MM/DD/YYYY)

From: Through:

10. ALLOTMENT ISSUED TO EACH HOUSEHOLD

NEW HOUSEHOLDS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER (Specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ONGOING HOUSEHOLDS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
OTHER (Specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
AUTOMATIC SUPPLEMENTS?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

11. GIVE TOTAL BREAKDOWN OF DISASTER SUPPLEMENTAL NUTRITION ASSISTANCE BENEFIT ISSUANCE FOR EACH PROJECT AREA AFFECTED

Name of Project Area	New Applicant Households Approved			Ongoing Recipient Households Approved			Grand Total of Benefits Issued (1) + (2)
	Number of Households Issued Benefits	Number of Persons Issued Benefits	Total Value of Benefits Issued (1)	Number of Households Issued Supplements	Number of Persons Issued Supplements	Total Value of Supplements Issued (2)	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="button" value="Delete"/> <input type="button" value="Insert Line [Alt-1]"/>							
Totals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

12. REMARKS