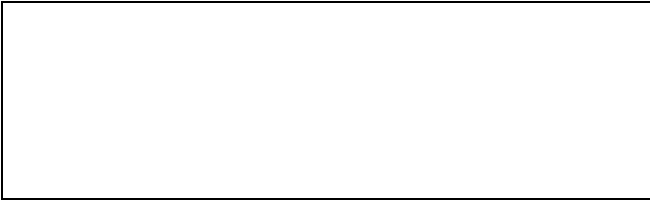


Louisiana Department of Children and Family Services

Simplified Reporting Reminder Notice of Incomplete Filing

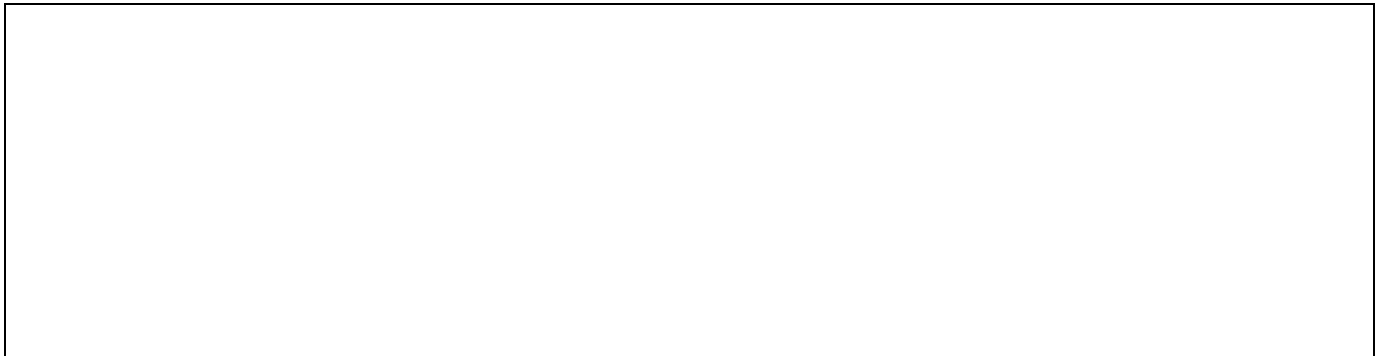


Case ID: _____

Date: _____

This is a reminder that your _____ Simplified Report was received but was not complete for the reasons below:

- ☐ Your Simplified Report form was not signed. Please sign the attached form and return it in the enclosed envelope by _____.
- ☐ Your Simplified Report did not contain the following information or required verifications that are necessary to determine eligibility and/or benefit amount. Please return the required information no later than _____.



You may FAX documents to (225) 663-3164, mail to DCFS Family Support/Economic Stability, P O Box 260031, Baton Rouge, LA, 70826-0031, or upload documents through the DCFS Customer Portal at www.dcfsls.la.gov/CAFE. Please include the head of household's name, Case ID Number, Social Security Number, and Date of Birth on all documents that you submit. Do not submit original documents such as original birth certificates or social security cards, or original check stubs. Please provide copies of these documents because the original may not be returned to you.

For more information about programs and services or for specific information about your case, call 1-888-LAHELPU (1-888-524-3578).

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR-P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation.

The completed AD-3027 form or letter must be submitted to:

1. mail: Food and Nutrition Service, USDA
1320 Braddock Place, Room 334
Alexandria, VA 22314; or

2. fax: (833) 256-1665 or (202) 690-7442; or

3. email: FNOSCIVILRIGHTSCOMPLAINTS@usda.gov

This institution is an equal opportunity provider.

You may file a civil rights complaint with the Department of Children and Family Services (DCFS) by completing the Civil Rights Complaint Form. Turn the form in to a local office; mail it to DCFS Civil Rights Section, P O Box 1887, Baton Rouge, LA 70821; email DCFS.BureauofCivilRights@LA.GOV, or; call (225) 342- 0309. You may file a civil rights complaint with DCFS and USDA or only DCFS.

A program complaint may be filed with the Department of Children and Family Services (DCFS) by emailing LAHelpU.DCFS@LA.GOV or by calling 225-342-2342.

What is a fair hearing?

Any time you disagree with a decision taken on your SNAP case, you have the right to request a fair hearing with an official who is required by law to review the facts of every case in a fair and objective manner.

When can you ask for a fair hearing?

You can ask for a fair hearing if:

- You applied for benefits and are denied, or
- You disagree with a decision on your case, or
- You believe your benefits were not calculated correctly.

Deadline to ask for a fair hearing?

For SNAP decisions:

- If we closed your case or denied your request for benefits, you must appeal within 90 days following the date of the notice.
- If we changed your benefit amount, you can appeal anytime within your certification period.

For FITAP/KCSP decisions, you must request a hearing within 30 days of the date this notice was mailed.

Can you get free legal help?

Yes. For free legal advice call (800) 256-1175

How do you ask for a fair hearing?

To request a fair hearing:

- Call 1-888-LAHELPU (1-888-524-3578) and request a fair hearing, or
- Complete and sign the section below and mail it to: DCFS Family Support/Economic Stability, P O Box 260031, Baton Rouge, LA, 70826-0031, or
- Visit a local DCFS office and speak to a supervisor

Please explain your reason for requesting a fair hearing

By signing this document and returning it, I am requesting a fair hearing.

Signature

Date

Phone Number

Return to:
DCFS Family Support/Economic Stability
P O Box 260031
Baton Rouge, LA 70826-0031