



## Commodity Supplemental Food Program Recertification Form

Name of Applicant	Telephone Number	County
Physical Address (Street, City, Zip Code)		
Mailing Address (If Different) (Street, City, Zip Code)		
Client Case Number	Applicant's Date of Birth	Total No. Living In Household
<b>Certification Criteria</b> <ul style="list-style-type: none"> <li>Participants address and continued interest in receiving CSFP benefits has been verified.</li> <li>Local agency has sufficient reason to believe participant (s) still meets the income eligibility standards (e.g. the elderly person has a fixed income)</li> <li>Local agency has notified participant verbally or in writing of the period of the extension.</li> </ul>		
Certifying Official Signature	Date Certified	Certification Period: First Month/Last Month:
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Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), 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. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: <https://www.ascr.usda.gov/filing-discrimination-complaint-usda-customer>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

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