Region 1
Alameda
Contra Costa
Los Angeles
Marin
Monterey
Napa
Orange
San Diego
San Francisco
San Luis Obispo
San Mateo
Santa Barbara
Santa Clara
Santa Cruz
Solano
Sonoma
Ventura

Region 2
All other counties.

AFDC Also known as CalWORKs

Region #1 Person	Nonexempt Max. Aid Payment	Exempt Maximum Aid Payment (EMAP)	80% of AFDC NEMAP	80% of AFDC EMAP	Minimum Basic Standard of Need
1	$359	$398	$287	$318	$532
2	584	653	467	522	872
3	723	808	578	646	1080
4	862	961	690	769	1282
5	980	1,094	784	875	1464
6	1,101	1,229	881	983	1645
7	1,210	1,350	968	1,080	1807
8	1,318	1,473	1,054	1,178	1969
9	1,424	1,591	1,139	1,273	2135
10	1,530	1,709	1,224	1,367	2318

AFDC Also known as CalWORKs

Region #2 Person	Nonexempt Max. Aid Payment	Exempt Maximum Aid Payment (EMAP)	80% of AFDC NEMAP	80% of AFDC EMAP	Minimum Basic Standard of Need
1	$340	$378	$272	$302	$504
2	555	623	444	498	828
3	689	771	551	617	1026
4	821	916	657	733	1220
5	934	1,045	747	836	1392
6	1,049	1,172	839	938	1565
7	1,150	1,288	920	1,030	1717
8	1,255	1,403	1,004	1,122	1873
9	1,356	1,518	1,085	1,214	2025
10	1,456	1,629	1,165	1,303	2204

CalWORKs Property Limits

$3,000 liquid resources for households with a member over 60
&
$2,000 for all other households

$4,650
for a motor vehicle
TOTALLY EXEMPT
if used for work, as a home, for fishing or for self employment.
Other exception available.
Call CCWRO for more information

Earned Income Disregards

STANDARD DEDUCTION
$225
Plus 50% of the Remainder

Subtracted what is left from the MAP amount and that would be the benefit level for recipients.

Need Support Services?

LEGAL ASSISTANCE, ANALYSIS OR INFORMATION CONCERNING
• AFDC/CalWORKs
• WtW/GAIN/WORKFARE
•FOOD STAMPS • REFUGEES
•GA/GR • MEDI-CAL

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Child Care

State Median Income

75% Family Size	75% Monthly Gross	100% Family Size	100% Monthly Gross
1	$3,386	1	$4,515
2	3,386	2	4,515
3	3,628	3	4,837
4	4,031	4	5,375
5	4,676	5	6,235
6	5,321	6	7,095
7	5,442	7	7,256
8	5,563	8	7,417
9	5,684	9	7,579
10	5,805	10	7,740

Who Is Eligible for Child Care

1. Persons who are getting CalWORKs money and working or participating in any WtW activity and need child care.

2. Persons who used to get CalWORKs money in the past 2 years if their gross income is below the 75% of the State median income (SMI).

3. Persons who used to get CalWORKs money longer than 2 years ago if their gross income is below the 75% of the SMI and there is enough money to pay for their child care.

4. Persons who have never gotten CalWORKs cash aid can still get child care if their income is below 75% of the SMI. However the eligibility (waiting) lists can be very long.

CCWRO PAT
2009 #1

FOOD STAMPS

Persons	Max. Gross Income Eld./Dis.	Gross Monthly Income 130% of Poverty	Net Income	Maximum Benefit Level
1	$ 1,430	$1,127	$867	$176
2	1,925	1,517	1,167	323
3	2,420	1,907	1,467	463
4	2,915	2,297	1,767	588
5	3,410	2,687	2,067	698
6	3,905	3,077	2,367	838
7	4,400	3,467	2,667	926
8	4,895	3,857	2,967	1,058
For Each Additional Person	+$495	+$390	+$300	+$132

STANDARD DEDUCTION

1-4 persons - $144
4 persons - $147
5 persons - $172
+ 6 persons - $197

SHELTER DEDUCTION $446 (maximum)

STANDARD UTILITY DEDUCTION $287 (maximum) EFFECTIVE 8/06

DEPENDENT CARE DEDUCTION $200 under 2 yrs old; $175 all others

HOMELESS HOUSING DEDUCTION $143

LIMILTED UTILITY ALLOWANCE $83

TELEPHONE UTILITY ALLOWANCE $20

2008 Annual Federal Poverty Level

1 Person	$10,400
2 -	14,000
3 -	17,600
4 -	21,200
5 -	24,800
6 -	28,400
7 -	32,000
8 -	35,600
9 -	39,200
10	42,800
Each Additional Person	3,600

Aged & Disabled Medi-Cal Income Disregards
Couple: $412
Individual: $230
A&D Income Limits
Couple: $ 1141
Individual: $ 1081

Effective June 1, 2008

SSI/CAPI	SINGLE		COUPLE		
	SSI	CAPI	SSI	CAPI	SSI/CAPI
BLIND	$972	$962	$1,806	$1,476	$1,796
AGED OR DISABLED	$907	$897	$1,579	$1,249	$1,569
DISABLED MINOR	$793	$783	SSI/CAPI		

RMA- Restaurant Meals Allowance - $84 Individual; $168 Couple

2009 Federal Benefit Rate

Individual	Couple
$674	$1,101

Effective Dates	12/99	4/08	4/08	4/08	4/08	4/08	4/08
MEDI-CAL		100% of Fed. Pov. Level	120% Fed. Pov. Level	133% of Fed. Pov. Level	185% of Fed. Pov. Level TMC	200% of Fed. Pov. Level Pregnant Women & Infacts up to age of 1	250% of Fed. Pov. Level Healthy Families & Working Disabled Program
Persons	Maintenance of Need	Substantial Gainful Activity $ 980					
1	$600	867	1040	1,153	1,604	1,734	2,167
2	750	1167	1400	1552	2159	2334	2917
2 adults	934	1167	1400	1552	2159	2334	2917
3	934	1467	1760	1951	2714	2934	3667
4	1,100	1767	2120	2350	3269	3542	4417
5	1,259	2067	2480	2749	3824	4134	5167
6	1,417	2367	2840	3148	4379	4734	5917
7	1,550	2667	3200	3547	4934	5334	5557
8	1,692	2967	3560	3946	5489	5934	7417
9	1,825	3267	3920	4345	6044	6534	8167
10	1,959	3567	4280	4744	6599	7134	8917
For Each Additional Person	+$14	+300	+360	+ $399	+ $555	+ $600	+ $750

Section 1931(b)

Property Limits	1931(B) MBSAC Test
$3,000	1 - $ 398
3,000	2 - 653
3,000	3 - 808
3,150	4 - 961
3,300	5 - 1094
3,450	6 - 1229
3,600	7 - 1350
3,750	8 - 1473
3,900	9 - 1591
4,050	- 1709
4,200	

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