





# FAMILY INDEPENDENCE ADMINISTRATION

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## POLICY BULLETIN # 14-80-OPE (This Policy Bulletin Obsoletes PB #02-116-OPE)

### REVISIONS TO NOTICE TO REPORT TO CENTER (M-3G)

<b>Date:</b> July 22, 2014	<b>Subtopic(s):</b> Form Revision
<p> This procedure can now be accessed on the FIAweb.</p>          <p> Please use Print on Demand to obtain copies of forms.</p>	<p>The purpose of this policy bulletin is to inform Job Center and Non Cash Assistance (NCA) Supplemental Nutrition Assistance Program (SNAP) Center staff that the "Notice to Report to Center" (<b>M-3g</b>) form has been revised as follows:</p> <ul style="list-style-type: none"><li>• The logo has been updated.</li><li>• A sentence has been changed to "If any required documentation is listed below, it must be brought into the Center with this letter."</li><li>• The word "document" has been changed to "required documentation."</li><li>• Some words/sentences have been bolded.</li></ul> <p>Job Center Directors and NCA SNAP Center Directors must ensure that all previous versions of the form and their multilingual equivalents are removed from circulation and recycled.</p> <p>A sample of the revised form is attached.</p> <p><i>Effective Immediately</i></p> <p><b>Related Item:</b></p> <p><a href="#">PB #06-132-OPE</a></p> <p><b>Attachments:</b></p> <p><b>M-3g</b> Notice to Report to Center (Rev. 7/22/14)</p> <p><b>M-3g (S)</b> Notice to Report to Center (Spanish) (Rev. 7/22/14)</p>

HAVE QUESTIONS ABOUT THIS PROCEDURE?  
Call 718-557-1313 then press 3 at the prompt followed by 1 or  
send an e-mail to *FIA Call Center Fax* or fax to: (917) 639-0298

Date: \_\_\_\_\_  
Case Number: \_\_\_\_\_  
Case Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Center: \_\_\_\_\_

### Notice to Report to Center

Please report to:

Location Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

On: Appointment Date: \_\_\_\_\_ Time: \_\_\_\_\_ Telephone: \_\_\_\_\_

To discuss:

SAMPLE

Other:

If any required documentation is listed below, it must be brought into the center **with this letter**.

Required documentation:

If you have any questions or are unable to keep this appointment, please call the telephone number above.  
**You must contact us prior to your reporting time to arrange a new appointment.**

**This is a mandatory eligibility appointment.** Failure to keep this appointment or contact us may make you ineligible for public assistance or may reduce your benefits for a specific period of time.

**This is a nonmandatory eligibility appointment.**

Fecha: \_\_\_\_\_  
Número del Caso: \_\_\_\_\_  
Nombre del Caso: \_\_\_\_\_  
Número de Teléfono: \_\_\_\_\_  
Centro: \_\_\_\_\_

### Aviso de Presentarse al Centro

Favor de presentarse a:

Local: \_\_\_\_\_

Dirección: \_\_\_\_\_  
\_\_\_\_\_

Ciudad: \_\_\_\_\_ Estado: \_\_\_\_\_ Código Postal: \_\_\_\_\_

El: \_\_\_\_\_ Fecha de la Cita: \_\_\_\_\_ Hora: \_\_\_\_\_ Teléfono: \_\_\_\_\_

Para tratar:

\_\_\_\_\_

Otro:

\_\_\_\_\_

Si se indica alguna documentación necesaria más abajo, usted tiene que traerla al centro **con esta carta**.

Documentación necesaria:

\_\_\_\_\_

Si tiene alguna pregunta o si no puede cumplir esta cita, favor de llamar al número de teléfono más arriba. **Usted tiene que comunicarse con nosotros antes de la hora programada para fijar una nueva cita.**

**Ésta es una cita obligatoria de elegibilidad.** El incumplimiento de esta cita o el no comunicarse con nosotros puede hacerle inelegible para asistencia pública o puede que se le reduzcan sus beneficios por un período de tiempo específico.

**Ésta es una cita de elegibilidad no obligatoria.**