

You must report changes to your case within 10 days of the change.

You can go to www.YourTexasBenefits.com to report changes, or use Page 2 of this form.

You must report the following types of changes:

Address and phone: Where you live, where you get your mail or your phone numbers.

Facts about you: Pregnancy, school, citizenship, felonies, health insurance policy or military status.

Things you are paying for or own: If you have more than \$10,000 in cash, bank accounts, loans, vehicles, stocks, bonds, CDs, IRAs or trusts.

Money from a job: Amount of money you make, how often you are paid, hours you work, if you are on strike or the reason you left a job.

Money from working for yourself: Type of job, amount of money you make, how often you are paid, number of months you will work, costs you pay for the job, or if a job ended.

Other money you get: Child support, alimony, insurance payment, dividends, interest, foster care, gifts, pensions, SSI or retirement.

Housing costs: Rent, house payment, utilities, taxes, insurance or homeowners association fees.

Day care costs: Care for a child or adult so you can work, find work, or go to school or training.

To report these changes or any other changes you have, you can:

- Fill out Page 2 of this form, and then mail it to the address listed on Page 2.
- Write a letter, and then mail it to the address listed on Page 2.
- Call the office phone number listed on Page 2.
- Contact your local eligibility determination office.

Tips:

- If you are unable to report a change, someone who knows about the change can report it for you.
- Whenever a change is made, you can ask for a receipt from the office.
- Your advisor can tell you the type of proof you need to give when you report a change.
- Reporting changes is a way to make sure people in your home get the right amount of benefits.
- You must not hide any facts about a change. You must tell the truth about changes. If you hide facts or don't tell the truth, you will owe us the value of any extra benefits you were not supposed to get.

Change Report

Name	Case No.	Advisor	Date
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You must report changes to your case within 10 days of the change. You must report changes outlined on Page 1 of this form.

Give the date of each change and the reason for the change.

You must show proof of the changes you list. To show proof, send copies of forms showing the change you are reporting. For example, if the amount of money you make at your job changes, send a copy of your pay stub.

Date of Change **Reason for Change**

How long do you expect the change to last?

X

Signature—Person reporting change

Date

If you have questions or want to report changes, contact:

Office Mailing Address
Call 2-1-1 or 1-877-541-7905 (toll-free). After you pick a language, press 2.

Telephone No. of Person Reporting the Change
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Signing up to vote:

Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.

If you are not registered to vote where you live now, would you like to apply to register to vote here today?..... Yes No

IF YOU DO NOT CHECK EITHER BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO REGISTER TO VOTE AT THIS TIME. If you would like help filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private. If you believe that someone has interfered with your right to register or to decline to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Elections Division, Secretary of State, P.O. Box 12060, Austin, TX 78711. Phone: 1-800-252-8683.

With a few exceptions, you have the right to request and be informed about the information the Texas Health and Human Services Commission (HHSC) obtains about you. You are entitled to receive and review the information upon request. You also have the right to ask HHSC to correct information that is determined to be incorrect (Government Code, Sections 552.021, 552.023, 559.004). To find out about your information and your right to request correction, please contact your local eligibility determination office.

The information provided on this form will be subject to verification of federal, state and local officials. If any is found inaccurate, you may be denied SNAP food benefits and/or be subject to criminal prosecution for knowingly providing false information.

Anyone buying or selling controlled substances (illegal drugs or certain drugs for which a doctor's prescription is required) in exchange for SNAP food benefits will not be able to get SNAP food benefits for two years for the first offense and permanently for the second offense. Anyone who gives false information in order to receive SNAP food benefits more than once in a month may be barred from the SNAP food benefits for 10 years.

Agency Use Only	
_____ Signature—Representative Receiving Report of Change	_____ Date

Voter Registration Status	
<input type="checkbox"/> Already registered <input type="checkbox"/> Client declined <input type="checkbox"/> Agency transmitted <input type="checkbox"/> Client to mail <input type="checkbox"/> Mailed to client <input type="checkbox"/> Other	
Agency staff signature	_____