Texas Department of Agriculture

Commodity Supplemental Food Program **Participant Transfer Form**

This participant is currently certified to receive Commodity Supplemental Food Program benefits.

Participant's Information		
Name	Signature	Date
Address	I	I
Certification Verification		
Certification period began on _		
	Dat	е
and expires on _	Dat	9
prohibited from discriminating on the basis of age, or reprisal or retaliation for prior civil right Program information may be made available is communication to obtain program information state or local agency that administers the prothe Federal Relay Service at (800) 877-8339. To file a program discrimination complaint, a which can be obtained online at: https://www.11-28-17Fax2Mail.pdf , from any USDA office, the complainant's name, address, telephone inform the Assistant Secretary for Civil Rights form or letter must be submitted to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights	race, color, national origin, sex (including gents activity. In languages other than English. Persons with (e.g. Braille, large print, audiotape, Americal gram or USDA's TARGET Center at (202) 72 Complainant should complete a Form AD-302 usda.gov/sites/default/files/documents/USDA by calling, (866) 632-9992, or by writing a lenumber, and a written description of the allegonals.	rights regulations and policies, this institution is nder identity and sexual orientation), disability, and disabilities who require alternative means of a Sign Language), should contact the responsible 0-2600 (voice and TTY) or contact USDA through 17, USDA Program Discrimination Complaint Form-OASCR%20P-Complaint-Form-0508-0002-508-tter addressed to USDA. The letter must contain ed discriminatory action in sufficient detail to ged civil rights violation. The completed AD-3027 (3) email: program.intake@usda.gov.
1400 Independence Avenue, SW Washington, D.C. 20250-9410; or	This institution is an equal opportunity provi	der.
Notes (ifnecessary)		
Current CE and Site's Information		
CE's name	Signature of CE or site's represe	ntative Date
CE's address		CE's area code and phone number