



Commodity Supplemental Food Program  
(CSFP)



Program Participant Closure Letter

Beneficiary Name: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Dear Beneficiary,

Your eligibility for participation in the Commodity Supplemental Food Program will end effective \_\_\_\_\_ due to the following reason(s):

You are no longer categorically eligible.

Your income exceeds the limit for your household size.

You are no longer a resident of this county.

You have failed to pick up your monthly food package for the last two months.

**Please contact us within 15 days of receipt of this notice if you wish to continue receiving a food package from this program.**

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Local Distributing Agency

\_\_\_\_\_  
Phone

\_\_\_\_\_  
CSFP LDA Representative Name

\_\_\_\_\_  
CSFP LDA Representative Signature

If you do not agree with the decision made in your case, you may request a Fair Hearing. A request for a Fair Hearing must be made orally or in writing within 60 days from the date of this notice by contacting the South Carolina Department of Agriculture, Office of Administrative Hearings. 1-800-311-7220 or TTY 1-800-311-7219 / Columbia area: (803) 898-8080. When complete, mail to the Office of Individual and Provider Rights, P.O. Box 1520, Columbia, SC 29202-1520 or Fax to: (803) 898-7269.

In accordance with Federal law and USDA policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, DC 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.