## **Commodity Supplemental Food Program (CSFP)**

## **Discontinuance Letter**

Client'	t's Name: Date:	
This le	ibution Site:Effective Date:letter is to inform you that your service through the CFSP program is being ( <b>Disconti</b> the Active CSFP program for the following reason/reasons:	
	Intentionally withholding information to qualify you for the program  Physical abuse or threat of physical violence against program staff  Selling CSFP commodity food items	
	name will be removed from the current CSFP list. You are not eligible to participate inder of the current registration year. Please note: 7 CFR 247.17(c) § 247.33 Fair he	
to app benefi	/hat is a fair hearing? A fair hearing is a process that allows a CSFP applicant or partioned an adverse action, which may include the denial or discontinuance of program fits, disqualification from the program, or a claim to repay the value of commodities wed as a result of fraud.	
You ha	have the right to appeal the discontinuance through the fair hearing process.	
	program standards are applied without discrimination by race, color, national original origin	n, age,
Please	se contact your service provider:	
	I have read the non-discrimination statement on the back of this form	

## **USDA Non-Discrimination Statement**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <a href="https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf">https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf</a>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

## 1. mail:

U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; or

2. fax:

(833) 256-1665 or (202) 690-7442; or

3. email:

program.intake@usda.gov

This institution is an equal opportunity provider.