

# WE CAN HELP PROVIDE YOUR FAMILY WITH BETTER NUTRITION



YOU COULD QUALIFY FOR **CALFRESH** IF:  
YOU HAVE A LOW OR FIXED INCOME.

| If you have this many persons in your family, INCLUDING YOURSELF: | 1       | 2       | 3       | 4       | 5       | 6       | 7       |
|---|---------|---------|---------|---------|---------|---------|---------|
| You may get CalFresh if your gross monthly income is less than:   | \$2,430 | \$3,288 | \$4,144 | \$5,000 | \$5,858 | \$6,714 | \$7,570 |

## HOW TO APPLY:

Call toll-free:  
**2-1-1**

Online at  
**GetCalFresh.org**



Online at  
**BenefitsCal.com**



For steps to a healthier you, go to **EatFresh.org**

