

Investigative Unit Operations Plan

County:

Contact Person:

Title:

Phone #:

E-mail Address:

1. What unit is responsible for the investigation of client fraud allegations?

Please provide the name of the unit, # of positions, titles of positions, and how allegations are processed.

2. What unit is responsible for the prosecution of client fraud allegations?

Please provide the name of the unit, # of positions, titles of positions, and how allegations are processed.

6. What are your procedures for offering a Disqualification Consent Agreement (DCA)?

7. How is it proven that an individual has been advised on the court record of the Public Assistance disqualification penalties?

Attach a copy of the agreement between your social services district and the District Attorney's Office for the prosecution of welfare fraud.