

Sample eData Log-In Screen

- **All eData users will log-in through this common authenticate application which is currently in the PRA review process. The log-in screens in this package are presented just to illustrate application tracking.**

Online Services Availability
Monday - Friday: 8am - 4am ET
Saturday: 8am - 11pm ET
Sunday: 8am - 11:30pm ET



Welcome to Government to Government Services Online

Government to Government Services Online (G2GSO) is a suite of applications enabling governmental organizations and authorized individuals to conduct business with and submit confidential information to the Social Security Administration. You must be registered to use any service included in the G2GSO suite of applications.

Log in to G2GSO [Log In](#)

G2GSO Information

Government to Government Services	
<p>Birth and Death Reporting A mechanism for state and jurisdiction bureaus of vital statistics to submit birth and death information to SSA.</p>	<p>Fugitive Felon Reporting Fugitive Felon reporting provides a mechanism for law enforcement agencies to submit arrest warrant information to SSA. Outstanding felony warrants and parole/probation violation warrants may lead to the suspension of social security benefits.</p>
<p>Interim Assistance Reimbursement Reporting A mechanism for state agencies that pay interim disability benefits to submit applicant information to SSA. The states require that applicants apply to SSA within 60 days of applying locally, and states must report IAR benefits authorization to SSA within 30 days.</p>	<p>Prisons Reporting Prison reporting provides a mechanism for correctional institutions to submit inmate information to SSA. Legislation requires SSA to stop paying benefits while social security beneficiaries are confined for specific periods of time.</p>
<p>Office of Child Support Reporting: FPLS, New Hire, and Quarterly Wage A mechanism for registered federal agencies to submit information to the Office of Child Support Enforcement.</p>	<p>Black Lung Part B and C Reporting A mechanism for the Department of Labor to submit Black Lung Part B and Part C information to SSA.</p>
<p>Sheltered Workshop A mechanism for Sheltered Workshop employers to submit monthly earnings reports to SSA Field Offices for SSI recipients who work for them.</p>	<p>OHG FRATS Upload A mechanism for the SSA Office of the Inspector General to upload law enforcement agency updates from the FBI to the Fugitive Reporting and Tracking system (FRATS).</p>
<p>Pension Benefits Guaranty Corp Upload A mechanism for the Pension Benefits Guaranty Corp. (PBGC) to submit pension plan information to SSA.</p>	

Have a question about G2GSO Services? Please contact G2GSO via email: WTE.Edge@mailhog2gso.gov



eData Services Login

OMB # 0960-XXXX

Acknowledgement for Website Access

I understand that the Social Security Administration will validate the information I provide against the information in Social Security Administration's systems.

I certify that:

- I understand that I may be subject to penalties if I submit fraudulent information.
- I agree that I am responsible for all actions taken with my User ID.
- I am aware that any person who knowingly and willfully makes any representation to falsely obtain information from Social Security records and/or intends to deceive the Social Security Administration as to the true identity of an individual could be punished by a fine or imprisonment, or both.
- I am authorized to do business under this User ID.

By entering your User ID, Password and clicking on the "Login" button, you certify that you have read, understand and agree to the above statements.

User ID:

Password:

Note: -Password is case sensitive
 -System will time-out after a half-hour of inactivity

If you need assistance with eData Services, please contact eData via email. UIT.Edata.mailbox@socialsecurity.gov.

Information about socialsecurity's Online Policies

The privacy of our customers has always been of utmost importance to the Social Security Administration. Our first regulation, published in 1937, was written and published to ensure your privacy. Our concern for your privacy is no different in the electronic age.

- [Details of socialsecurity's Online Privacy Policy](#)
- [Details of socialsecurity's Online Security Policy](#)
- [The Privacy Act and The Freedom of Information Act](#)
- [Paperwork Reduction Statement](#)

eData Application Home Page

- **Please Note: This is a sample page that includes all eData services; however users will only have access to their authorized application.**

Social Security Online

www.socialsecurity.gov

Government to Government Services Online

GSO Home

John D Smith

john.d.smith@ssa.gov

4105551234

[Log Out](#)

[Change your password](#)

[Customer Support Search](#)

[Account Maintenance](#)

PAPERWORK Reduction Act



Welcome to Government to Government Services Online

You have access to:

[Birth Reporting](#)

[Black Lung Reporting](#)

[Death Reporting](#)

↔ [Fugitive Felon Reporting](#) ↔

[OIG Fugitive Reporting and Tracking System \(FRATS\) Reporting](#)

[Interim Assistance Reimbursement \(IAR\) Reporting](#)

[OCSE Reports \(FPLS, New Hire & Quarterly Wage Data\)](#)

[Pension Benefits Guaranty Corporation \(PBGC\)/ERISA Reporting](#)

[Prison Reporting](#)

[Data Exchange](#)

[Sheltered Workshop](#)

[Secure Messaging](#)

For your security, please log out
and close all your Internet windows
when you are finished.

Link to the Fugitive Felon Reporting PRA Statement in eData:

Paperwork Reduction Act Statement - This information collections contained in this agreement meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to provide the information unless we display a valid Office of Management and Budget control number. The OMB control number for this collection is 0960-XXXX. We estimate that it will take about 1 hour to read the instructions, gather the facts, and provide the information.

If you have *comments on our time estimate please send them to: SSA, 6401 Security Blvd. Baltimore, MD 21235-0001. Send only comments relating to our time estimate to this address, not the completed form.*

eData Fugitive Felon Reports Application Pages

Social Security Online
 www.socialsecurity.gov (72650) Home User Instructions

John D Smith
 Log Out

Government to Government Services Online

Send Fugitive Felon Reports

OMB# 0960-XXXX

Attach Files (Step 1 of 2)

Please Note: DO NOT RENAME YOUR FILE OR ALTER THE PATH ONCE YOU HAVE SELECTED IT USING THE BROWSE BUTTON. Assume that the file you intend to send is named according to the fugitive felon file naming convention prior to hitting the BROWSE button.
File name should follow the format "SXX:YYMMDD FUF RXXXX"
 where XX = State Postal Abbreviation, YYMMDD = Year, Month, Day, XXXX = RID identifier

A maximum of 8 files can be added and all files must total less than 200 MB
[Click here for fugitive felon report data format information.](#)

File 2:

Social Security Online
 www.socialsecurity.gov (72650) Home

John D Smith D
 Logout

Government to Government Services Online

Fugitive Felon Report Data Format

Please remember that all fugitive felon files submitted to SSA must be in a standard ASCII text file format (i.e. tab delimited with CRLF between records); that is, the file should contain fixed-length records. Sending fugitive felon data in an Excel spreadsheet or Word document will cause the upload to the SSA mainframe to be aborted. Review the layout below to ensure that you are submitting a good file.
[Format for Fugitive Felon Data Files](#)

Regional Fugitive Felon Contacts

You can view the list of the Regional Fugitive Felon Coordinators using this link:
[Regional Fugitive Felon Coordinator List](#)

To send fugitive felon reports [click here](#)

Social Security Online
 www.socialsecurity.gov (72650) Home User Instructions

John D Smith
 Log Out

Government to Government Services Online

Send Fugitive Felon Reports

Confirmation (Step 2 of 2)

[Print](#)

Your information has been submitted and will be processed.

Confirmation number: 77391
 Date and timestamp: 11-21-2006 at 09:49 EST

You will be notified by email if there are any errors or problems that prevent us from processing your submission.

File Name	File Size
fugitiveFelon_113006.txt	207.0 KB
Total file size: 700.0 KB	

Link Contents -- Format for Fugitive Felon eData Files

Format for Fugitive Felon eData Files

eData is SSA's new Internet based method of submitting fugitive felon reports to SSA. This program permits safe, encrypted transmission of the prepared fugitive felon file. However, eData does not actually prepare the report. The file must first be created in the specific format for SSA fugitive felon reporting. The specifications and format is detailed below.

INPUT FIELD LOCATION	FIELD NAME	FIELD SIZE	FIELD TYPE (A=alpha N=numeric)	ENTRY REQUIREMENT (M=mandatory C=conditional Opt=optional)
1-9	SOCIAL SECURITY NUMBER	9	N	M
10-12	ENTRY CODE "TPV"	3	A	M
13-15	PROCESSING CODE "417"	3	N	M
16-28	LAST NAME	13	A/N	M
29-38	FIRST NAME	10	A/N	M
39-45	MIDDLE NAME/INITIAL	7	A/N	Opt
46-53	DATE OF BIRTH (MMDDCCYY)	8	N	Opt
54	SEX CODE (M=MALE, F=FEMALE)	1	A	Opt
55-62	DATE REPORT PREPARED (MMDDCCYY)	8	N	M
63-82	SUBJECT'S DRIVER'S LICENSE NUMBER	20	A/N	Opt
83-84	SUBJECT'S DRIVER'S LICENSE STATE	2	A	Opt
85-92	DATE WARRANT ISSUED (MMDDCCYY)	8	N	M
93-95	BLANKS	3		
96-105	NCIC NUMBER	10	A/N	C
106-108	BLANKS	3		
109-117	ORIGINATING AGENCY IDENTIFICATION NUMBER (ORI#) OR SSA ISSUED AGENCY IDENTIFICATION NUMBER	9	A/N	M
118-119	WARRANT ISSUING STATE	2	A	M
120-122	BLANKS	3		
123-142	ORIGINATING AGENCY CASE NUMBER (OCA#)	20	A/N	C
143-146	OFFENSE CODE (NCIC STANDARD)	4	A/N	M
147-150	REPORTER ID CODE (as assigned by SSA)	4	A/N	M
151-180	WARRANT ISSUING AGENCY NAME	30	A/N	M
181-200	WARRANT NUMBER	20	A/N	C
201	SUBJECT'S RACE	1	A	Opt
202-211	WARRANT ISSUING AGENCY TELEPHONE NUMBER	10	N	Opt
212-241	BLANKS	30	A	
242-253	FBI NUMBER	12	N	Opt
254-273	OFFENSE TYPE (BURGLARY, MURDER, ETC.)	20	A	C
274	OFFENSE CHARGE SYMBOL (F OR P)	1	A	C
275-300	BLANKS	26		

FIELD SIZE TOTAL: **300**

DESCRIPTION OF DATA ELEMENTS (FIELD NAME)

Following is a definition for each data element in the record with descriptions of the data to be entered, as well as guidelines for completing each field. Please note that fields are annotated as mandatory (M), conditional (C) or optional (Opt). Reporters should attempt to provide as many of the optional data elements as possible to enable SSA and law enforcement to have a comprehensive record on the wanted individual.

Social Security Number—the Social Security number of the wanted individual. **This field must not be left blank. If the Social Security number is unknown, this field must be filled with zeros. (M)**

Entry Code “TPV”—a code used by SSA for internal processing identification. **TPV must appear in each record in the file. (M)**

Processing Code “417”—a code used by SSA for internal processing identification. **417 must appear in each record in the file. (M)**

Last Name—the wanted person’s last name. **This field must not be left blank. (M)**

First Name—the wanted person’s first name. **This field must not be left blank, but it may contain only one letter if that is all that is known. (M)**

Middle Name/Initial—the wanted person’s middle name or initial if known. **Otherwise this field should be left blank. Do not submit substitutions of “NMN,” “NMI,” “no middle name,” etc. (Opt)**

NAME FIELD EDITS:

A. ALIASES

Submit any other names (do not submit other SSN or DOB) that the wanted individual may be using. For example, if “John Smith”, SSN 123-45-6789, wanted on warrant # 123456789, DOB 01/01/1970, is also known as “John Jones”, SSN, DOB, warrant # the same as the John Smith record, submit this information as a separate record in the file.

B. NICKNAMES/ABBREVIATIONS

For the purpose of this match, do **not** submit **nicknames** (such as Bubba, Gypsy, Rambo or Buddy) nor **abbreviated names**. When a person applies for a Social Security Card, only those names established by birth records and/or court documents relating to name changes are acceptable. Also, do **not** submit **gang names** or **street names**.

C. SPECIAL CHARACTERS NOT ALLOWED

Apostrophes (‘)

Periods (.)

Parenthesis ()

Slashes (\ or/)

Quotes (“)

Special Characters ~,!,@,#,\$,%,&,*,<,>,-,_,=,+,(,),/, \, ?

NAME FIELD EDITS: (Continued)

D. TITLES NOT ALLOWED

Jr or Junior spelled out
Sr or Senior spelled out
I or First spelled out
II or Second spelled out
III or Third spelled out
IV or Fourth spelled out

NOTE: JUVENILES--Do not annotate any record as "JUVENILE". The SSA processing system will interpret "juvenile" as a name and this will result in a "no match" to SSA's SSN records.

E. COMPOUND NAMES

Last names, first and/or middle names containing compound names must contain a SPACE dividing the names. Examples of compound names are: Van-Meter, Von-Paris, Perez-Rodriguez, Smith-Jones, Alice-Marie, Rose-Bud, and Smith-Barney. Reporting examples:

	<u>LAST NAME</u>	<u>FIRST NAME</u>	<u>MIDDLE NAME</u>
Actual Name:	Smith-Barney	Alice-Marie	Rose-Bud
Send to SSA:	Smith Barney	Alice Mari	Rose Bu

Date of Birth—wanted person's date of birth, if known. Format must be MMDDCCYY. If the month and year are known and the day is unknown, enter the correct month and correct year and enter two zeros for the day. Enter a zero before single-digit months and days--for example, July 7, 1977=07071977. **If the date of birth is unknown, it may be left blank. (Opt)**

Sex Code—gender of the wanted person. M=male, F=female. **If unknown, leave this field blank. (Opt)**

Date report prepared—date the report was prepared for submission to SSA. Enter a zero before any single-digit month or date, i.e., 7/7/2001=07072001. **This is a required field and must be filled with valid numerics, MMDDCCYY. (M)**

Subject's Driver's License Number—wanted person's driver's license number, if known. **If unknown, leave this field blank. (Opt)**

DESCRIPTION OF DATA ELEMENTS (Continued)

Subject's Driver's License State— use the standard postal alpha abbreviation of the State that issued the wanted person's driver's license. **If unknown, leave this field blank. (Opt)**

Date Warrant Issued— date the arrest warrant for the fugitive felon was issued. The format must be MMDDCCYY. **This is a required field. (M)**

NCIC Number—identifying Number assigned to fugitive felon record by National Crime Information Center (NCIC). This number is only assigned to NCIC records. **This is a required field if neither the OCA# nor the warrant number is available. (C)**

Originating Agency Identification Number (ORI#)—

Identifying Agency number assigned by the Criminal Justice Information Service (CJIS) to the law enforcement agency,

OR , if the law enforcement agency does not have an ORI#, then:

The identifying nine-position alpha/numeric code assigned by SSA to law enforcement agencies that do not have an ORI number, referred to by SSA as the **SSA Issued Agency Identification Number**.

The field must contain alpha/numeric characters only. **This is a required field and must be filled with one of the two above described identification numbers. (M)**

Warrant Issuing State—use the standard postal alpha abbreviation for the State that issued the warrant. **This is a required field. (M)**

Originating Agency Case Number (OCA#)—the number assigned to the case record by the law enforcement agency. **This is a required field if neither the NCIC Number nor the Warrant Number is available. (C)**

Offense Code (NCIC Standard)—the NCIC standard code for the type of offense committed by the fugitive felon. **This is a required field. (M)**

Reporter ID Code—4-position reporter ID code that SSA has assigned to your agency. The field is required and must contain alpha/numeric characters only. **This is a required field and must be completely filled. (M)**

EXAMPLE:

CODE

3NYF

NY01

SOURCE SUPPLYING DATA

New York State Police

New York City Police Department

Warrant Issuing Agency Name—name of the agency issuing the warrant for the fugitive felon. **This is a required field. (M)**

DESCRIPTION OF DATA ELEMENTS (Continued)

Warrant Number—number assigned by the court when the warrant is issued. **This is a required field if neither the NCIC Number nor the OCA Number is available. (C)**

Subject's Race—use the following NCIC standard codes for race.

<u>Race</u>	<u>Code</u>
American Indian or Alaskan Native	I
Asian or Pacific Islander	A
Black	B
White	W
Unknown	U

If NCIC standard race codes are not used, leave this field blank. (Opt)

Warrant Issuing Agency Telephone Number—the phone number that the wanted person should be directed to call for additional information on the warrant. The notice that SSA issues to the wanted person to advise that payments are being suspended must provide contact information to assist the wanted person in satisfying the warrant. **This is not a required field. (Opt)**

FBI Number—the number assigned to the case by the FBI. **This is not a required field, but if the information is available on a wanted individual, every effort should be made to provide it to SSA. (Opt)**

Offense Type—the type of offense (spelled out), e.g. “burglary,” “murder,” etc. **This is a required field if the reporter has not provided the Offense Charge Symbol in Field 274. (C)**

Offense Charge Symbol—use one of the following symbols for the charged offense:
F=Felony, or P=Parole/probation violation. **This is a required field if the reporter has not provided the Offense Type in field 254-273. (C)**

DUMMY FILE FORMAT FOR SUBMITTING "ZERO" REPORT

(For reporters who agreed to submit files monthly)

All current fugitive felon and parole/probation violation records should be submitted each month (even though many will be duplicates from previous reports).

SSA has an automated database which tracks for the timely submission of monthly reports by all reporters. This database produces an alert for SSA personnel to contact the reporter anytime 45 days have elapsed since the last report. For SSA's monitoring purposes, if there are **NO** fugitive felons/parole probation violators in the monthly reporting period, reporters should submit a MONTHLY "**ZERO**" report. Filing this "zero" report will enable SSA to properly credit the reporter with the submission of a timely report.

THE FILE SHOULD BE FORMATTED AS FOLLOWS:

...referring to the original input format on the first page

The **SSN** field should be all 9's.

The entry in the **LAST NAME** field should be "**DUMMY**"

The entry in the **FIRST NAME** field should be "**RECORD**"

The **DATE OF BIRTH** field should be all **ZEROS**.

All other data should be the same as for a regular report.

NOTE: NO OUTPUT (FEEDBACK) FILES WILL BE SENT BACK TO THE REPORTER VIA eDATA AT THIS TIME.

Link Contents – Regional Fugitive Felon Coordinators List

Regional Fugitive Felon Contacts (RFFC)

BOSTON REGION	States of Service Area: <u>ME, CT, MA, NH, RI, VT</u>	
PHILIP KRAJEWSKI (Title XVI) philip.krajewski@ssa.gov	617-565-2887	FAX: 617-565-9359
ROSEMARIE RUO (Title XVI-back-up) rosemarie.ruo@ssa.gov	617-565-2887	FAX: 617-565-9359
SUSAN GLOWIK (Title II) susan.glowik@ssa.gov	617-565-2882	FAX: 617-565-9359
NEW YORK REGION	States of Service Area: <u>NY, NJ, Puerto Rico, Virgin Islands</u>	
ED CONTA ed.conta@ssa.gov	212-264-1461	FAX: 212-264-2071
PHILADELPHIA REGION	States of Service Area: <u>DE, MD, PA, VA, WV, DC</u>	
NANCY RUYMEN nancy.ruymen@ssa.gov	215-597-1760	FAX: 215- 597-2989
BRUNO TUCCI (back-up) bruno.tucci@ssa.gov	215-597-1761	
ATLANTA REGION	States of Service Area: <u>AL, FL, GA, KY, MS, NC, SC, TN</u>	
STACEY HALL (Title XVI) stacey.hall@ssa.gov	404-562-1301	FAX: 404-562-1325
BENITA DALLAS (Title II) benita.dallas@ssa.gov	404-562-1324	FAX: 404-562-1583
CHICAGO REGION	States of Service Area: <u>IL, IN, MI, MN, OH, WI</u>	
PAUL FEDDERSEN (Title XVI) paul.feddersen@ssa.gov	312-575-5982	FAX: 312-575-4245

BORK MARONN (Title II) bork.maronn@ssa.gov	312-575-4240	FAX: 312-575-4245
DALLAS REGION	States of Service Area: <u>AR, LA, NM, OK, TX</u>	
BETH BROWN (T16) beth.brown@ssa.gov	214-767-4224	FAX: 214-767-1348
LATANGIE GRIFFIN (T2) latangie.griffin@ssa.gov	214-767-4224	FAX: 214-767-4488
EDNA LEON (T2 backup) edna.leon@ssa.gov	214-767-4224	FAX: 214-767-4488
KANSAS CITY REGION	States of Service Area: <u>IA, KS, MO, NE</u>	
BRENT SHUMWAY (Title XVI) brent.shumway@ssa.gov	816-936-5651	FAX: 816-936-5951
GLORIA J. KELLY (Title II) gloria.j.kelly@ssa.gov	816-936-5656	FAX: 816-936-5951
DENVER REGION	States of Service Area: <u>CO, MT, ND, SD, UT, WY</u>	
SUKEY AUSTIN sukey.austin@ssa.gov	303-844-7374	FAX: 303-844-3256
SAN FRANCISCO REGION	States of Service Area: <u>AZ, CA, HI, NV, Guam, American Samoa</u>	
HAL ZAWACKI (Title XVI) hal.zawacki@ssa.gov	510-970-8257	FAX: 510-970-8101
JILL BAKER (Title XVI back-up) jill.baker@ssa.gov	510-970-8244	FAX: 510-970-8101
DE ANNA BARRIOS-TERRY (Title II) de.anna.barrios-terry@ssa.gov	510-970-8213	FAX: 510-970-8101
ANN ZIFF (Title II back-up) ann.ziff@ssa.gov	510-970-8251	FAX: 510-970-8101

ALAN FOLLET (Matching Agreements only) alan.follett@ssa.gov	510-970-8245	FAX: 510-970-8101
SEATTLE REGION	<i>States of Service Area: AK, ID, OR, WA</i>	
DON LAWSON don.lawson@ssa.gov	206-615-2653	FAX: 206-615-2643
LAURIE MOORE laurie.d.moore@ssa.gov	206-615-2667	FAX: 206-615-2643

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