REPRESENTATIVE PAYEE REPORT

		RRB Claim No.	SSN		
		Annuitant's Name Reporting Period			
,					
_	and return this form in the enclosed of Duties and Paperwork Reduction Ac	_			
1. Does the annuitant live with you?	☐ YES ☐ NO				
If NO, enter the name, address and pl during the reporting period.	none number of the persons or i	nstitutions with whom t	the annuitant lived		
NAME	ADDRESS	() DAYT	IME PHONE		
		()			
NAME	ADDRESS	DAYT	IME PHONE		
Are you the court appointed guardian or or fiduciary guardian is a person appoi individual.)					
☐ YES-Attach a copy of the most and go to item 7. (Do not submit☐ NO-Go to item 3.			to the court		
3. Enter the total amount of railroad retainment annuitant during the reporting period					
4. Enter the dollar amount of railroad annuitant's expenses during the repo					
5. Enter a breakdown of the total expensitems 5(a) through 5(d).	ses entered in item 4 by the cate	egories listed in	-		
a. Room/Board	b. Clothing/Person	nal Spending			
c. Medical/Dental Care	Dental Care d. Other				

6. If there were surp was held.	lus railroad retirement be	nefits at the end	l of the reporti	ng period, show l	now the balance	
was neid. Cash \$ Checking Account \$		ınt \$	Savings Account \$			
	ription) \$(Amo			=		
	=					
	benefits were held in checon of the account below.	king or savings	accounts, indi	cate the title or o	wnership	
	's name by your name"		"Your name f	or beneficiary's r	ıame"	
	ibe)					
. Have you used any	y of the railroad retirement n expenses or requiremen	nt benefits receiv			reporting	
	e the following information					
Amount used \$		Ex	planation of us	se:		
□ NO−Go to ite	em 8.					
During the reporti	ng period, did the annuita	ant have income	from any of th	e following source	es?	
☐ YES—Enter a	n "X" in the appropriate b	oox(es) and prov	ide the request	ed information.		
☐ Social	Security \$					
			Claim Number			
☐ Public	Service Pension \$	Amount	Claim	Number		
		Workers'				
☐ Work	\$Amount	Compensation	n \$	ount	Claim Number	
☐ NO-Go to ite						
Railroad Retireme charges for such a	victed of a criminal or min nt Board or Social Securit n offense currently pendir te items 9(a) through 9(f)	ty Administrations in a court of la	on within the paw?	ast fifteen years,		
	te items 3(a) through 3(i)			n the space provi		
a. What was/were the	offense(s) for which you wer	e convicted?				
b. On what date(s) we	re you convicted?			-		
c. What was/were you	r sentence(s)?					
d. If imprisoned, wher	ı were you released?			-		
e. If probation was ord	lered, when did or will the p	robation end?	-			
f. If charges are current number, if known.	ntly pending, please give the	location of the co	urt in which cha	rges are pending,	and the court docket	
Location:			Docke	t Number:		
CERTIFICATION STA' or for withholding informativen is true, complete an	TEMENT: I understand that civation to cause payment of benefid correct.	vil and criminal pena ts by the RRB. I affi	alties may be impo rm that to the bes	sed on me for false or t of my knowledge, th	fraudulent statements, e information I have	
Sign _{Signature} _				DA	TE	
here			_			
DAYTIME PHO:	NE ()				 	

Paperwork Reduction Act/Privacy Act Notices

This notice is given under the Paperwork Reduction Act of 1995 and the Privacy Act of 1974. The information requested on this form is used by the Railroad Retirement Board (RRB) to conduct an accounting of your performance as representative payee for the reporting period shown on the form. The RRB's authority for requesting this information is section 7(b)(6) of the Railroad Retirement Act.

Your obligation to provide the requested information is voluntary. However, your failure to respond can result in your being asked to complete a more detailed report and it may result in a suspension of benefit payments or your removal as representative payee.

The information you provide on this form may be disclosed without your approval to the individual or institution you identified in question number one. Such information may also be disclosed without your approval to the General Accounting Office for audits, to the Justice Department for collecting overpayments owed to the RRB or the Social Security Administration, to law enforcement agencies and in court proceedings. A complete listing of the persons, organizations and agencies to which the information you give us may be released is available at any office of the RRB.

We estimate this form takes an average of 18 minutes per response to complete, including the time needed for reviewing the instructions, getting the needed data, and reviewing the completed form. Federal agencies may not conduct or sponsor, and respondents are not required to respond to, a collection of information unless it displays a valid OMB number. If you wish, send comments regarding the accuracy of our estimate or any other aspect of this form, including suggestions for reducing completion time, to the Chief of Information Resources Management, Railroad Retirement Board, 844 North Rush Street, Chicago, Illinois 60611-2092.

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Representative Payee Duties

Use of benefits

You must use the railroad retirement benefits you receive for the annuitant in his or her best interest. To do this you must keep yourself informed of what the annuitant needs.

Record-keeping requirements

As part of your responsibilities as a representative payee, you must keep careful and accurate records regarding your receipt, disbursement and use of the annuitant's funds. Periodically, you will be asked to complete a report which will include the following questions:

- What was the amount of benefits on hand at the beginning of the year?
- How were the railroad retirement benefits available during the year used for support of the annuitant?
- How much of the railroad retirement benefits did you save for the annuitant?

- How did you invest the savings?
- Where did the annuitant live during the year?
- What was the annuitant's amount of income from other sources during the year?

Reporting to the RRB

The following changes must be reported by the representative payee to the RRB:

- You are discharged as legal guardian.
- A legal guardian is appointed or guardianship changes.
- You are no longer responsible for the annuitant's care.
- Your address changes.
- You are convicted of a criminal offense.
- The annuitant dies.
- The annuitant is restored to competency by a court.
- The annuitant marries, remarries, or divorces.
- The annuitant leaves your custody and care.

- The annuitant's address changes.
- The annuitant is outside the United States for more than 30 consecutive days.
- The annuitant performs any work, including self-employment.
- The annuitant is convicted of a criminal offense.
- The annuitant begins to receive a public service pension, or there is a change in the amount of the pension.
- An application for social security benefits is filed by the annuitant.
- A student annuitant graduates from high school or ceases full-time school attendance.