U.S. DEPARTMENT OF AGRICULTURE - Food and Nutrition Service

WORKSHEET FOR QUALITY CONTROL REVIEWS

PRIVACY ACT NOTICE: This report is required under provisions of 7 CFR 275.14 (SNAP). This information is needed for the review of State performance in determining recipient eligibility. The information is used to determine State compliance and failure to report may result in a finding of non-compliance.

OMB STATEMENT: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0074. The time required to complete this collection is estimated to average 8.9 hours per response, including the time to review instructions, search existing data sources, gather the data needed, and complete and review the information collection.

A. IDENTIFYING INFORM	IAT	ION				В.	PERSONS L	VING IN	N THE HOME		
1. LOCAL AGENCY									RELATIONSHIP	SOCIAL	SNAP
2. CASE NAME					NAM	1E	BIRTH DATE	AGE	OR SIGNIFICANCE	SECURITY NUMBER	RECIPIENT
3. ADDRESS				1							
				2							
4. PHONE NUMBER				3							
										<u> </u>	
5. DIRECTIONS TO LOCATE				4							
				5							
				6							
				7							
				8							
				9							
6. CASE NUMBER				10							
7. REVIEW NUMBER						C. SIGNIFIC	ANT PERSON		LIVING IN THE	НОМЕ	ł
8. REVIEW DATE						RELATIONSHIP	SOCIAL	,		PHONE	FINANCIAL
9. RESERVED					NAME	RELATIONSHIP OR SIGNIFICANCE	SOCIAL SECURITY NUMBER	^	ADDRESS	NUMBER	SUPPORT
10. MOST RECENT ACTION				11							
a. Date				12							
b. Туре				13							
11. CERTIFICATION PERIOD From:				14							
To:				15							
12. PART. DURING SAMPLE MONTH		YES	NO				D. REVIE	W FIND	DINGS		
13. REC'D EXPEDITED SERVICE		YES	NO		ALLOTMENT						
14. CATEGORICALLY ELIGIBLE HH		YES	NO								
15. REVIEWER											
16. DATE ASSIGNED					AMOUNT CO	ORRECT			UNDERISSUANCE		
17. DATE OF CASE READING											
18. DATE OF INTERVIEW					OVERISSUA	NCE			INELIGIBLE		
19. DATE COMPLETED											
20. SUPERVISOR					AMOUNT IN ERRO	DR					
21. DATE CLEARED											
FNS-380 (12/08) Previous Editions Obsolete					SB						Page 1
Electronic Form Version Designed in Adobe 8.1 Version					JD	U					U U

ELEMEN	ITS OF ELIGIBILITY AND PAYMENT DETERMINATION	ON REVIEW NO	
ELEMENTS OF ELIGIBILITY AND BASIS OF ISSUANCE	QC ANALYSIS OF CASE RECORD (Pertinent facts, sources of verification, reliability, gaps or deficiencies)	FINDINGS OF FIELD INVESTIGATION (Facts obtained, verification and substantiation, nature of errors)	RESULTS
(1)	(2)	(3)	(4)
110 AGE	BASIC PROGRAM RE	QUIREMENTS (100)	1 = No error
			2 = Agency error
			3 = Client error
111 STUDENT STATUS			1 = No error
			2 = Agency error
			3 = Client error
130 CITIZENSHIP AND NON- CITIZEN STATUS			1 = No error
			2 = Agency error 3 = Client error
140 RESIDENCY			1 = No error
			2 = Agency error 3 = Client error
			Paga

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(1)	(2)	(3)	(4)
150 HOUSEHOLD COMPOSITION			1 = No error 2 = Agency error 3 = Client error
151 RECIPIENT DISQUALIFICATION			1 = No error 2 = Agency error 3 = Client error
WORK REQUIREMENTS			1 = No error
160 EMPLOYMENT & TRAINING PROGRAMS			2 = Agency error
161 TIME LIMITED PARTICIPATION			3 = Client error
			1 = No error 2 = Agency error 3 = Client error
162 WORK REGISTRATION			1 = No error
			2 = Agency error 3 = Client error
163 VOLUNTARY QUIT/REDUCING WORK EFFORT			1 = No error
			2 = Agency error 3 = Client error

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(1)	(2)	(3)	(4)
164 WORKFARE AND COMPARABLE WORKFARE			1 = No error
			2 = Agency error
			3 = Client error
165 EMPLOYMENT STATUS/JOB AVAILABILITY			1 = No error
AVAILADILITT			2 = Agency error
			3 = Client error
166 ACCEPTANCE OF EMPLOYMENT			1 = No error
			2 = Agency error
			3 = Client error
170 SOCIAL SECURITY NUMBER			1 = No error
			2 = Agency error
			3 = Client error
LIQUID RESOURCES	RESOURC	ES (200)	1 = No error
211 BANK ACCOUNTS OR CASH ON HAND			2 = Agency error
			3 = Client error

213 OTHER LIQUID ASSETS 213 OTHER LIQUID ASSETS NON-LIQUID RESOURCES 221 REAL PROPERTY 222 VEHICLE 1 = No error 2 = Agency err 3 = Client error 3 = Client err	ELEMEN	ITS OF ELIGIBILITY AND PAYMENT DETERMINATION	REVIEW NO.	· ·
212 NONRECURRING LUMP-SUM 1 = No error 2 = Agency err 213 OTHER LIQUID ASSETS 1 = No error 2 = Agency err 213 OTHER LIQUID ASSETS 1 = No error 2 = Agency err NON-LIQUID RESOURCES 1 = No error 2 = Agency err 211 REAL PROPERTY 1 = No error 2 = Agency err 222 VEHICLE 1 = No error 2 = Agency err		(Pertinent facts, sources of	(Facts obtained, verification and	RESULTS
PAYMENTS PAYMENT P	(1)	(2)	(3)	(4)
213 OTHER LIQUID ASSETS 2 = Agency err 213 OTHER LIQUID ASSETS 1 = No error 2 = Agency err 3 = Client error 2 = Agency err 1 = No error 2 = Agency err 2 = Agency err				1 = No error
213 OTHER LIQUID ASSETS 1 = No error 2 = Agency err 3 = Client error 3 = Client erro				2 = Agency error
NON-LIQUID RESOURCES 221 REAL PROPERTY 222 VEHICLE 1 = No error 2 = Agency error				3 = Client error
NON-LIQUID RESOURCES 1 = No error 221 REAL PROPERTY 2 = Agency err 222 VEHICLE 1 = No error	213 OTHER LIQUID ASSETS			1 = No error
NON-LIQUID RESOURCES 1 = No error 221 REAL PROPERTY 2 = Agency err 222 VEHICLE 1 = No error 222 VEHICLE 1 = No error				2 = Agency error
221 REAL PROPERTY 2 = Agency err 3 = Client error 2 = Agency err 3 = Client error 2 = Agency err				3 = Client error
221 REAL PROPERTY 2 = Agency err 3 = Client error 222 VEHICLE 1 = No error 2 = Agency err 2 = Ag	NON-LIQUID RESOURCES			1 = No error
222 VEHICLE 3 = Client error 1 = No error 2 = Agency err	221 REAL PROPERTY			
222 VEHICLE 1 = No error 2 = Agency err				
1 = No error 2 = Agency err				3 = Client error
1 = No error 2 = Agency err				
2 = Agency err	222 VEHICLE			
3 = Client erro				2 = Agency error
				3 = Client error

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(1)	(2)	(3)	(4)
224 OTHER NON-LIQUID RESOURCES			1 = No error 2 = Agency error 3 = Client error
225 COMBINED RESOURCES			1 = No error 2 = Agency error 3 = Client error

ELEMEN	ITS OF ELIGIBILITY AND PAYMENT DETERMINAT	TION REVIEW NO.	
ELEMENTS OF ELIGIBILITY AND BASIS OF ISSUANCE	QC ANALYSIS OF CASE RECORD (Pertinent facts, sources of verification, reliability, gaps or deficiencies)	FINDINGS OF FIELD INVESTIGATION (Facts obtained, verification and substantiation, nature of errors)	RESULTS
(1)	(2)	(3)	(4)
EARNED INCOME	INCOM	и ЩЕ (300)	1 = No error
11 WAGES AND SALARIES			
			2 = Agency error
			3 = Client error
312 SELF-EMPLOYMENT			1 = No error
			2 = Agency error
			3 = Client error
			1

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(1)	(2)	(3)	(4)
314 OTHER EARNED INCOME			1 = No error
			2 = Agency error
			3 = Client error
EARNED INCOME DEDUCTIONS			1 = No error
21 EARNED INCOME DEDUCTIONS			2 = Agency error
			3 = Client error
323 DEPENDENT CARE DEDUCTIONS			1 = No error
			2 = Agency error
			3 = Client error

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(1)	(2)	(3)	(4)
INEARNED INCOME			1 = No error
31 RSDI BENEFITS			
			2 = Agency error
			3 = Client error
32 VETERANS BENEFITS			1 = No error
			2 = Agency error
			3 = Client error
33 SSI AND/OR STATE SSI SUPPLEMENT			1 = No error
			2 = Agency erro
			3 = Client error
			3 = Client error
34 UNEMPLOYMENT COMPENSATION			1 = No error
			2 = Agency erro
			3 = Client error

ELEMENT	S OF ELIGIBILITY AND PAYMENT DETERMINATION	N REVIEW NO.	
ELEMENTS OF ELIGIBILITY AND BASIS OF ISSUANCE	QC ANALYSIS OF CASE RECORD (Pertinent facts, sources of verification, reliability, gaps or deficiencies)	FINDINGS OF FIELD INVESTIGATION (Facts obtained, verification and substantiation, nature of errors)	RESULTS
(1)	(2)	(3)	(4)
335 WORKER'S COMPENSATION			1 = No error
			2 = Agency error
			3 = Client error
336 OTHER GOVERNMENT BENEFITS			1 = No error
			2 = Agency error
			3 = Client error
342 CONTRIBUTIONS			
			1 = No error
			2 = Agency error
			3 = Client error
343 DEEMED INCOME			
			1 = No error
			2 = Agency error
			3 = Client error
			Paga

ELEMEN	ITS OF ELIGIBILITY AND PAYMENT DETERMINATIO	N REVIEW NO.	
ELEMENTS OF ELIGIBILITY AND BASIS OF ISSUANCE	QC ANALYSIS OF CASE RECORD (Pertinent facts, sources of verification, reliability, gaps or deficiencies)	FINDINGS OF FIELD INVESTIGATION (Facts obtained, verification and substantiation, nature of errors)	RESULTS
(1)	(2)	(3)	(4)
344 TANF, PA or GA			1 = No error
			2 = Agency error
			3 = Client error
345 EDUCATIONAL GRANTS/ SCHOLARSHIPS/LOANS			1 = No error
SCHOLARSHIF S/LOANS			2 = Agency error
			3 = Client error
346 OTHER UNEARNED INCOME			1 = No error
			2 = Agency error
			3 = Client error
350 CHILD SUPPORT PAYMENTS RECEIVED FROM ABSENT			1 = No error
PARENT			2 = Agency error
			3 = Client error

ELEMENT	S OF ELIGIBILITY AND PAYMENT DETERMINATION	N REVIEW NO.	
ELEMENTS OF ELIGIBILITY AND BASIS OF ISSUANCE	QC ANALYSIS OF CASE RECORD (Pertinent facts, sources of verification, reliability, gaps or deficiencies)	FINDINGS OF FIELD INVESTIGATION (Facts obtained, verification and substantiation, nature of errors)	RESULTS
(1)	(2)	(3)	(4)
OTHER DEDUCTIONS			1 = No error
361 STANDARD DEDUCTION			2 = Agency error
			3 = Client error
363 SHELTER DEDUCTION			1 = No error
			2 = Agency error
			3 = Client error
364 STANDARD UTILITY ALLOWANCE			
			1 = No error
			2 = Agency error
			3 = Client error

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(1)	(2)	(3)	(4)
365 MEDICAL DEDUCTION			1 = No error 2 = Agency error
366 CHILD SUPPORT PAYMENT DEDUCTION			3 = Client error 1 = No error 2 = Agency error 3 = Client error
371 COMBINED GROSS INCOME			1 = No error 2 = Agency error 3 = Client error
372 COMBINED NET INCOME			1 = No error 2 = Agency error 3 = Client error

ELEMEN	ITS OF ELIGIBILITY AND PAYMENT DETERMINATION	REVIEW NO.	
ELEMENTS OF ELIGIBILITY AND BASIS OF ISSUANCE	QC ANALYSIS OF CASE RECORD (Pertinent facts, sources of verification, reliability, gaps or deficiencies)	FINDINGS OF FIELD INVESTIGATION (Facts obtained, verification and substantiation, nature of errors)	RESULTS
(1)	(2)	(3)	(4)
520 ARITHMETIC COMPUTATION			1 = No error
			2 = Agency error
			3 = Client error
530 TRANSITIONAL BENEFITS			1 = No error
			2 = Agency error
			3 = Client error
560 REPORTING SYSTEM			1 = No error
			2 = Agency error
			3 = Client error
810 SNAP SIMPLIFICATION PROJECT			1 = No error
			2 = Agency error
			3 = Client error
820 DEMONSTRATION PROJECTS			1 = No error
			2 = Agency error
			3 = Client error

ELIGIBILITY WORKER FINAL SAQC DETERMINA- ATION (3) (4) Wages, selaries, Federal workstudy minus allowable expenses, or other income from employment. (Do not court excluded income) (3) (4) Member Source (1) (2) (3) (4) Member Source (1) (2) (3) (4) Member Source (1) (2) (3) (4) 1 Add Line K from Self-Employment adtendum sheet (f applicable) and at earned income listed above. (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) (4)	
Wages subiries, Federal workstudy minus allowable expenses, or other income from employment. (Do not count excluded income) Member Source Image: Source Image: Source	(5)
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addendum sheet (if applicable) and learned income listed above. Image: Comparison of Comparison	
addendum sheet (if applicable) and all earned income listed above.Image: scholarships, or loans (except Federal workstudy)2. Enter monthly income received from educational grants, etc.Image: scholarships, or loans (except Federal workstudy)3. Enter monthly utilion and mandatory fees and other allowable expenses.Image: scholarships, or loans (except Federal workstudy)4. Subtract 3 from 2.Image: scholarships, or loans (except federal workstudy)5. Add lines 1 and 4.Image: scholarships, or loans (except federal workstudy)Unearned income (Do not court excluded income)Image: scholarships, or loans (except federal workstudy)Image: scholarships, or loans (except federal workstudy)Image: scholarships, or loans (except federal workstudy)6. Total unearned income.Image: scholarships, or loans (except federal workstudy)7. Add lines 5 and 6.Image: scholarships, or loans (except federal workstudy)8. Enter net loss from 1 (Result is gross monthly income)Image: scholarships, or loans (except federal workstudy)9. Subtract line 8 from 7. (Result is gross monthly income)Image: scholarships, or loans (except federal workstudy)10. Enter appropriate gross income eligibility limit.Image: scholarships, or loans (except federal workstudy)10. Enter appropriate gross income eligibility limit.Image: scholarships, or loans (except federal workstudy)10. Enter appropriate gross income eligibility limit.Image: scholarships, or loans (except federal workstudy)10. Enter appropriate gross income eligibility limit.Image: scholarships, or loanships, or loansh	
(except Federal workstudy) Image: Constraint of the second se	
educational grants, etc3. Enter monthly fultion and mandatory fees and other allowable expenses.4. Subtract 3 from 2.5. Add lines 1 and 4.Unearned income (Do not count excluded income)::: <t< td=""><td></td></t<>	
fees and other allowable expenses.4. Subtract 3 from 2. </td <td></td>	
5. Add lines 1 and 4. Image: Constraint of the second	
Unearned income (Do not count excluded income)Image: Constraint of the second seco	
Image: Second	
Gross monthly incomeImage: Constraint of the second se	
Gross monthly incomeImage: Constraint of the second se	
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Gross monthly income Image: Constraint of the state of the stat	
7. Add lines 5 and 6.	
8. Enter net loss from line K, if applicable. Image: Constraint of the stress from 7. (Result is gross monthly income.) Image: Constraint of the stress from 7. (Result is gross monthly income.) 9. Subtract line 8 from 7. (Result is gross monthly income.) Image: Constraint of the stress from 7. (Result is gross monthly income.) Image: Constraint of the stress from 7. (Result is gross monthly income.) 10. Enter appropriate gross income eligibility limit. Image: Constraint of the stress from 7. (Result is gross monthly income.) Image: Constraint of the stress from 7. (Result is gross monthly income.) Go to line 11 only if: Image: Constraint of the stress from 7. (Result is gross from 7. (Result is gross from 7. (Result is gross monthly income.) Image: Constraint of the stress from 7. (Result is gross from 7. (
if applicable.Image: constraint of applicable in the second s	
is gross monthly income.) Image: Comparison of the system of the sys	
income eligibility limit. Image: Comparison of the system of the sys	
 line 9 is less than or equal to line 10; or household contains an elderly/disabled member; or household is categorically eligible for SNAP Benefits. 	
DEDUCTIONS: (Other than shelter)	
11. Multiply line 1 by 20% and enter result here.	
12. Subtract 11 from 9.	
13. Enter standard deduction.	
14. Subtract line 13 from 12.	
15. Enter medical costs over limit for household with elderly/disabled member.	
16. Subtract line 15 from 14.	
17. Enter dependent care costs (not to exceed authorized limit).	
18. Subtract line 17 from 16.	
19. Enter child support.	
20. Subtract line 19 from 18.	Daga 15

QUALITY CONTROL

COMPUTATION SHEET					
	ELIGIBILITY WORKER	FINAL SAQC DETERMIN- ATION			
	(1)	(2)	(3)	(4)	(5)
21. Enter homeless shelter deduction, if applicable.					
22. Subtract 21 from 20.					
 If household had shelter costs, and did not receive a homeless shelter deduction divide line 22 by 2. 					
SHELTER COSTS: (Use either the utility standard or the actual cost of each utility bill.)					
Rent or mortgage					
Taxes and insurance					
Total utility standard					
Telephone (Basic rate)					
Electric					
Gas					
Oil					
Water and Sewage					
Garbage and trash					
Installation of utilities					
Other					
24. Total shelter costs					
25. Enter amount from line 23.					
26. Subtract line 25 from 24 (Result equals excess shelter costs).					
27. If no elderly/disabled member, enter the maximum limit for the shelter deduction.					
NET MONTHLY INCOME					
28. Enter amount from line 20 (income after all deductions except shelter)					
 If elderly/disabled member, enter line 26. For all other households, enter amount from line 26 or 27, whichever is less. 					
30. Subtract line 29 from 28. (Result equals net monthly income.)					
31. Enter appropriate net income eligibility limit.					
Go to line 32 only if: Line 30 is less than or equal to line 31; OR					
all members of the HH are categorically eligible.					
32. Enter Thrifty Food Plan for household size.					
33 Multiply line 30 by 30% and enter result here.					
 Subtract line 33 from 32; (prorating or applying minimum allotment if required.) 					

QUALITY CONTROL

QUALITY CONTROL COMPUTATION SHEET SELF-EMPLOYMENT ADDENDUM

FOR HOUSEHOLDS WITH SELF-EMPLOYMENT I INCOME: START AT STEP A AND WORK THROUGH STEP K. DO THE STEPS IN ORDER. IF A NEGATIVE NUMBER RESULTS AFTER SUBTRACTING TWO NUMBERS, INSERT ZERO, EXCEPT LINES O, J, AND	ELIGIBILITY WORKER	FINAL SAQC DETERMIN- ATION			
К.	(1)	(2)	(3)	(4)	(5)
FARM SELF-EMPLOYMENT INCOME					
HOUSEHOLD MEMBERS : SOURCE					
<u> </u>					
<u> </u>					
A. Total monthly gross farm self-employment income					
B. Enter monthly farm business costs					
SUBTRACT LINE B FROM LINE A, AND:					
C. If gross income exceeds costs enter figure here as not farm gain.					
 D. If business costs exceed gross income, enter figure here as net farm gain. 					
SELF-EMPLOYMENT INCOME OTHER THAN FARMING (Include room and board payments)					
:					
:					
:					
E. Total monthly gross self-employment income other than farming.					
F. Enter monthly farm self-employment income from line C (If Applicable)					
G. Add lines E and F. (Result is total self-employment income.)					
H. Enter monthly business cost other than farming.					
I. Subtract line H from G. (Result is net monthly self-employment income before taxes; (If Less Than O, Enter 0.)					
J. Enter net farm loss from line D (If none, enter 0)					
K. Subtract line J from I. Enter as a positive number, a negative number or 0.					

If line K shows a net gain, add to wages and salaries on line 1 and enter 0 on line 8 of the Computation Sheet.

If Line K shows a net loss, enter amount on line 8 of the Computation Sheet and make no entry for self-employed income on line 1.