

**SSP-MOE DATA REPORT - SECTION 2  
DISAGGREGATED DATA COLLECTION FOR FAMILIES NO LONGER RECEIVING  
ASSISTANCE UNDER THE STATE SEPARATE PROGRAM**

**GENERAL INFORMATION**

1. State FIPS Code      2. County FIPS Code      3. Reporting Month      4. Stratum

|  |  |                            |                     |  |
|--|--|----------------------------|---------------------|--|
|  |  | Year<br>       <br>Y Y Y Y | Month<br>   <br>M M |  |
|--|--|----------------------------|---------------------|--|

**FAMILY LEVEL DATA**

5. Case Number - State Separate Program      6. Zip Code      7. Disposition      8. Reason for Closure

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**ASSISTANCE RECEIVED BY THE FAMILY**

9. Received Subsidized Housing      10. Received Medical Assistance      11. Received Food Stamps      12. Received Subsidized Child Care

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**PERSON LEVEL DATA**

| Person | 13. Family Affiliation | 14. Date of Birth (Age)<br>Y Y Y Y M M D D | 15. Social Security Number |
|--------|------------------------|--|----------------------------|
| 1      |                        |  | -                          |
| 2      |                        |  | -                          |
| 3      |                        |  | -                          |
| 4      |                        |  | -                          |
| 5      |                        |  | -                          |
| 6      |                        |  | -                          |
| 7      |                        |  | -                          |
| 8      |                        |  | -                          |

Person

13. Family Affiliation

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14. Date of Birth (Age)

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15. Social Security Number

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16. Race/Ethnicity

Ethnicity

Race

Person

A. Hispanic or Latino

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B. American Indian of Alaska Native

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C. Asian

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D. Black or African American

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E. Native Hawaiian or Pacific Islander

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F. White

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18. Received Disability Benefits

| Person | 17. Gender | A. Received Federal Disability Insurance Benefits - OASDI | B. Received Benefits Based on Federal Disability Status | C. Received Aid Under Title XIV-APDT | D. Received Aid Under Title XVI-AABD | E. Received Aid Under Title XVI-SSI | 19. Marital Status |
|--------|------------|---|---|--------------------------------------|--------------------------------------|-------------------------------------|--------------------|
| 1      |            |   |   |                                      |                                      |                                     |                    |
| 2      |            |   |   |                                      |                                      |                                     |                    |
| 3      |            |   |   |                                      |                                      |                                     |                    |
| 4      |            |   |   |                                      |                                      |                                     |                    |
| 5      |            |   |   |                                      |                                      |                                     |                    |
| 6      |            |   |   |                                      |                                      |                                     |                    |
| 7      |            |   |   |                                      |                                      |                                     |                    |
| 8      |            |   |   |                                      |                                      |                                     |                    |
| 9      |            |   |   |                                      |                                      |                                     |                    |
| 10     |            |   |   |                                      |                                      |                                     |                    |
| 11     |            |   |   |                                      |                                      |                                     |                    |
| 12     |            |   |   |                                      |                                      |                                     |                    |
| 13     |            |   |   |                                      |                                      |                                     |                    |
| 14     |            |   |   |                                      |                                      |                                     |                    |
| 15     |            |   |   |                                      |                                      |                                     |                    |
| 16     |            |   |   |                                      |                                      |                                     |                    |

| Person | 20. Relationship to Head of Household | 21. Parent with Minor Child in the Family | 22. Needs of a Pregnant Woman | 23. Educational Level | 24. Citizenship / Alienage | 25. Employment Status |
|--------|---------------------------------------|---|-------------------------------|-----------------------|----------------------------|-----------------------|
| 1      |                                       |   |                               |                       |                            |                       |
| 2      |                                       |   |                               |                       |                            |                       |
| 3      |                                       |   |                               |                       |                            |                       |
| 4      |                                       |   |                               |                       |                            |                       |
| 5      |                                       |   |                               |                       |                            |                       |
| 6      |                                       |   |                               |                       |                            |                       |
| 7      |                                       |   |                               |                       |                            |                       |
| 8      |                                       |   |                               |                       |                            |                       |

| Person | 20. Relationship to Head of Household | 21. Parent with Minor Child in the Family | 22. Needs of a Pregnant Woman | 23. Educational Level | 24. Citizenship / Alienage | 25. Employment Status |
|--------|---------------------------------------|---|-------------------------------|-----------------------|----------------------------|-----------------------|
| 9      |                                       |   |                               |                       |                            |                       |
| 10     |                                       |   |                               |                       |                            |                       |
| 11     |                                       |   |                               |                       |                            |                       |
| 12     |                                       |   |                               |                       |                            |                       |
| 13     |                                       |   |                               |                       |                            |                       |
| 14     |                                       |   |                               |                       |                            |                       |
| 15     |                                       |   |                               |                       |                            |                       |
| 16     |                                       |   |                               |                       |                            |                       |

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**AMOUNT OF INCOME, BY TYPE**

| Person | 26. Amount of Earned Income | 27. Amount of Unearned Income |
|--------|-----------------------------|-------------------------------|
| 1      |                             |                               |
| 2      |                             |                               |
| 3      |                             |                               |
| 4      |                             |                               |
| 5      |                             |                               |
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| 10     |                             |                               |
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| 12     |                             |                               |
| 13     |                             |                               |
| 14     |                             |                               |
| 15     |                             |                               |
| 16     |                             |                               |