Changes June 2007
- SET ASIDE FOR BURIAL OF: 9 [3-M] changed to MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X [6-M]
- IF OTHER, NAME: [4-C] changed to NAME FOR WHOM SET ASIDE [5-M]
- Added information/instruction as follows under NAME FOR WHOM SET ASIDE due to SET ASIDE FOR BURIAL OF format change: "For each person's claim path, the system will compare the name entered in this field with the name on ACID in order to select the correct pronoun or name for the SSI printed output (e.g. application). If the resource is set aside for burial of the person whose name and SSN display at the top of the screen, enter the name in this field the same way that it appears on ACID."
- Changed field name for [2-M] TYPE to [2-M] SELECT TYPE.

SCREEN FACSIMILE 1:

```
MSSICS                    BURIAL FUNDS                   PAGE 1 OF RFND
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                           TRANSFER TO: XXXX

 SELECT TYPE: 9   1=BURIAL CONTRACT   2=BURIAL TRUST
 DESCRIPTION: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
              XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 DATE ASSET SET ASIDE (MMDDYY): 999999

 NAME FOR WHOM SET ASIDE:
   XXXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX

 MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
   LIVING WITH FATHER, LIVING WITH MOTHER) (Y/N): X

 EARNS INTEREST(Y/N): X
   IF EARNS INTEREST, INTEREST REMAINS IN FUND (Y/N): X

 CO-OWNED(Y/N): X

 RESOURCE DISPOSAL AGREEMENT (Y/N): X    PROOF OF DISPOSAL (Y/N): X

 ANOTHER SOURCE (Y): X      DELETE THIS SOURCE (Y): X         REMARKS (Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS                      BURIAL FUNDS                PAGE _ OF RFND
 SSS-SS-SSSS  SSSSS  SSSSSSSSSS                         TRANSFER TO: XXXX

 RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
 CO-OWNER
 (Y/N) FROM TO    NAME
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X                OTHER CO-OWNERS

 ANOTHER SOURCE (Y): X                                  REMARKS (Y): X
```

```
MSSICS                       BURIAL FUNDS                    PAGE _ OF RFND
 SSS-SS-SSSS  SSSSS  SSSSSSSSSS                              TRANSFER TO: XXXX

  RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  SPECIFY OTHER CO-OWNERS:

  FROM  TO    NAME
  9999  9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  9999  9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  9999  9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  9999  9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS




  ANOTHER SOURCE (Y): X                              REMARKS (Y): X
```

SCREEN FACSIMILE 4:

```
MSSICS                    BURIAL FUNDS                  PAGE _ OF RFND
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                        TRANSFER TO: XXXX
 RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
               REVOCABLE   IRREVOCABLE
 FROM    TO    ALLEGED/    ALLEGED/       LOAN     EXCLUDED   COUNTABLE
(MMYY)  (MMYY) VERIFIED    VERIFIED       AMOUNT    AMOUNT     AMOUNT
 PPPP    PPPP  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999
 9999    9999  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999
 9999    9999  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999
 9999    9999  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999
 9999    9999  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999
 9999    9999  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999
 9999    9999  999999999   999999999    999999999 999999999  SSSSSSSSS
               999999999   999999999

 EXCLUSION REASON:  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 ANOTHER SOURCE (Y): X      CONTINUATION SHEET (Y): X        REMARKS (Y): X
```

Changes June 2007

- Changed field [22-M] SET ASIDE FOR BURIAL OF to MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER, LIVING WITH FATHER).
- Changed field [23-C] IF OTHER, NAME to NAME FOR WHOM HELD.

SCREEN FACSIMILE 1:

```
 MSSICS                   LIFE INSURANCE                    PAGE 1 OF RLIF
  SSS-SS-SSSS  SSSSS SSSSSSSSSS                              TRANSFER TO: XXXX
  TYPE OF POLICY: 9   1=POLICY WITH CSV (WHOLE LIFE, UNIVERSAL LIFE,
                     TERM WITH CSV, ETC.)    2=POLICY WITHOUT CSV
  NAME OF INSURED: P  1=SAME AS ABOVE    2=OTHER
  IF OTHER, SPECIFY: XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XXXX
  FACE VALUE: 999999999       IF POLICY WITH CSV, CSV NEEDED (Y/N): X
  COMPANY: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
  ADDRESS: XXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXX
           XXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXX
  POLICY NUMBER: XXXXXXXXXXXX   DATE PURCHASED (MMDDYY): 999999

  POLICY PAYS DIVIDEND ACCUMULATIONS (Y/N): X
  IF POLICY HAS CSV AND NO DIVIDEND ACCUMULATIONS,
     POLICY PAYS DIVIDEND ADDITIONS (Y/N): X

                    SET ASIDE FOR BURIAL (Y/N): X    PASS EXCLUSION (Y/N): X
  IF TOTALLY EXCLUDED, OWNERSHIP END DATE (MMDDYY): 999999
  RESOURCE DISPOSAL AGREEMENT (Y/N): X      PROOF OF DISPOSAL (Y/N): X


  ANOTHER SOURCE (Y): X     DELETE THIS SOURCE (Y): X        REMARKS (Y): X
```

```
MSSICS                    LIFE INSURANCE                 PAGE   OF RLIF
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                           TRANSFER TO: XXXX

  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS


  NAME FOR WHOM HELD: XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXX XXXX

  MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
     LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X

  DATE ASSET SET ASIDE (MMDDYY): 999999




 ANOTHER SOURCE (Y): X                                   REMARKS (Y): X
```

SCREEN FACSIMILE 3:

```
MSSICS                    LIFE INSURANCE                   PAGE   OF RLIF
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                          TRANSFER TO: XXXX
  RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  FROM     TO     ALLEGED    VERIFIED     LOAN     EXCLUDED    COUNTABLE
 (MMYY)  (MMYY)     CSV         CSV       AMOUNT     AMOUNT      AMOUNT
  PPPP    PPPP   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
  9999    9999   999999999   999999999  999999999  999999999   SSSSSSSSS
 EXCLUSION REASON: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 ANOTHER SOURCE (Y): X      CONTINUATION SHEET (Y): X      REMARKS (Y): X
```

Changes June 2007
- Changed [28-M] SET ASIDE FOR BURIAL OF to [29-M] MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER, LIVING WITH FATHER).
- Changed [29-C] IF OTHER, NAME to [28-M] NAME FOR WHOM HELD.

SCREEN FACSIMILE 1:

```
MSSICS      PROMISSORY NOTES/LOANS/PROPERTY AGREEMENTS      PAGE 1 OF RNOT
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                              TRANSFER TO: XXXX
 TYPE: 9   1=PROMISSORY NOTE/COMMERCIAL LOAN    3=ORAL/INFORMAL LOAN
           2=WRITTEN/INFORMAL LOAN              4=PROPERTY AGREEMENT
 BORROWER: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX    PHONE: 999 999 9999
  ADDRESS: XXXXXXXXXXXXXXXXXXXXX  XXXXXXXXXXXXXXXXXXXXX
           XXXXXXXXXXXXXXXXXXXXX  XXXXXXXXXXXXXXXXXXXXX
 EARNS INTEREST(Y/N): X

 IF TYPE = 2 OR 3 COMPLETE THE FOLLOWING:
  DATE OF ORIGINAL LOAN (MMDDYY): 999999   AMOUNT OF ORIGINAL LOAN: 999999999
  DESCRIBE COLLATERAL:   XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
  IS THERE A TIMETABLE OR PLAN TO REPAY (Y/N): X
  HOW DOES BORROWER INTEND TO REPAY:
  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
     VALID UNDER STATE LAW (Y/N): X

 CO-OWNED(Y/N): X    SET ASIDE FOR BURIAL (Y/N): X   PASS EXCLUSION (Y/N): X
 IF TOTALLY EXCLUDED, OWNERSHIP END DATE (MMDDYY): 999999
 RESOURCE DISPOSAL AGREEMENT(Y/N): X  PROOF OF DISPOSAL(Y/N): X

 ANOTHER SOURCE (Y): X      DELETE THIS SOURCE (Y): X        REMARKS (Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS      PROMISSORY NOTES/LOANS/PROPERTY AGREEMENTS     PAGE _ OF RNOT
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                          TRANSFER TO: XXXX

 RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
 CO-OWNER
 (Y/N) FROM  TO    NAME
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X    9999  9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X                OTHER CO-OWNERS


 ANOTHER SOURCE (Y): X                              REMARKS (Y): X
```

SCREEN FACSIMILE 3:

```
MSSICS      PROMISSORY NOTES/LOANS/PROPERTY AGREEMENTS      PAGE _ OF RNOT
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                             TRANSFER TO: XXXX

  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

 SPECIFY OTHER CO-OWNER:

 FROM   TO    NAME
 9999   9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
 9999   9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
 9999   9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
 9999   9999  SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS




 ANOTHER SOURCE (Y): X                                    REMARKS (Y): X
```

```
MSSICS      PROMISSORY NOTES/LOANS/PROPERTY AGREEMENTS      PAGE _ OF RNOT
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                             TRANSFER TO: XXXX

  RESOURCE ID    SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS


  NAME FOR WHOM HELD: XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXX XXXX

  MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
     LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X

  DATE ASSET SET ASIDE (MMDDYY): 999999

  RESOURCE EARNS INTEREST (Y/N): P
    IF RESOURCE EARNS INTEREST, INTEREST REMAINS IN FUND (Y/N): X




  ANOTHER SOURCE (Y): X                                      REMARKS (Y): X
```

SCREEN FACSIMILE 5:

```
 MSSICS      PROMISSORY NOTES/LOANS/PROPERTY AGREEMENTS      PAGE _ OF RNOT
  SSS-SS-SSSS   SSSSS SSSSSSSSS                              TRANSFER TO: XXXX
  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
     FROM      TO       ALLEGED       VERIFIED      EXCLUDED      COUNTABLE
    (MMYY)   (MMYY)      VALUE         VALUE        AMOUNT        AMOUNT
     PPPP     PPPP     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS
     9999     9999     999999999     999999999     999999999     SSSSSSSSS

  EXCLUSION REASON: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
  ANOTHER SOURCE (Y): X      CONTINUATION SHEET (Y): X        REMARKS (Y): X
```

Changes June 2007

- Changed [22-M] SET ASIDE FOR BURIAL OF to [23-M] MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER, LIVING WITH FATHER).
- Changed [23-C] IF OTHER, NAME to [22-M] NAME FOR WHOM HELD.

SCREEN FACSIMILE 1:

```
MSSICS                    OTHER RESOURCES                    PAGE 1 OF ROTH
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                              TRANSFER TO: XXXX
 TYPE: 9  1=LIFE ESTATE OTHER THAN RESIDENCE        5=TRUST
          2=UNPROBATED ESTATE OTHER THAN RESIDENCE  6=RETIREMENT/PENSION FUND
          3=BELONGINGS HELD IN SAFE DEPOSIT BOX     7=MINERAL RIGHTS
          4=LIFE INSURANCE DIVIDEND ACCUMULATIONS   8=OTHER
     IF OTHER, SPECIFY:  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

  DESCRIPTION:  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
                XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

  IF TYPE = 1, 2, 5, 7 OR 8      INCOME FROM PROPERTY (Y/N): X
  IF TYPE = 5                 DISBURSEMENTS FROM TRUST (Y/N): X
  IF TYPE = 5 OR 8      QUALIFIES AS MEDICAID TRUST (Y/N): X
  IF TYPE = 4, 5, 6 OR 8        SET ASIDE FOR BURIAL (Y/N): X


  CO-OWNED (Y/N): X                        PASS EXCLUSION (Y/N): X

  RESOURCE DISPOSAL AGREEMENT (Y/N): X     PROOF OF DISPOSAL (Y/N): X

  ANOTHER SOURCE (Y): X      DELETE THIS SOURCE (Y): X       REMARKS (Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS                    OTHER RESOURCES            PAGE   OF ROTH
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                     TRANSFER TO: XXXX

 RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
 CO-OWNER
 (Y/N) FROM TO    NAME
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X     9999 9999    SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSS SSSS
  X                  OTHER CO-OWNERS

 ANOTHER SOURCE (Y): X                              REMARKS (Y): X
```

SCREEN FACSIMILE 3:

```
MSSICS                    OTHER RESOURCES              PAGE   OF ROTH
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                      TRANSFER TO: XXXX

  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  SPECIFY OTHER CO-OWNER:

  FROM  TO    NAME

  9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX



 ANOTHER SOURCE (Y): X                              REMARKS (Y): X
```

SCREEN FACSIMILE 4:

```
MSSICS                    OTHER RESOURCES                PAGE   OF ROTH
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                         TRANSFER TO: XXXX

   RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS


   NAME FOR WHOM HELD: XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XXXX

   MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
      LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X

   DATE ASSET SET ASIDE (MMDDYY): 999999

   RESOURCE EARNS INTEREST (Y/N): X
      IF RESOURCE EARNS INTEREST, INTEREST REMAINS IN FUND (Y/N): X




 ANOTHER SOURCE (Y): X                                    REMARKS (Y): X
```

SCREEN FACSIMILE 5:

```
MSSICS                    OTHER RESOURCES                  PAGE   OF ROTH
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                         TRANSFER TO: XXXX
  RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

    FROM     TO    ALLEGED    VERIFIED     LOAN     EXCLUDED    COUNTABLE
   (MMYY)  (MMYY)   VALUE      VALUE      AMOUNT     AMOUNT      AMOUNT
   PPPP    PPPP   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
   9999    9999   999999999  999999999  999999999  999999999  SSSSSSSSS
 EXCLUSION REASON: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 ANOTHER SOURCE (Y): X      CONTINUATION SHEET (Y): X          REMARKS (Y): X
```

Changes June 2007

- Changed [20-M] SET ASIDE FOR BURIAL OF to [21-M] MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER, LIVING WITH FATHER).
- Changed [21-C] IF OTHER, NAME to [20-M] NAME FOR WHOM HELD.

SCREEN FACSIMILE 1:

```
MSSICS                    STOCKS AND BONDS                  PAGE 1 OF RSTB
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                             TRANSFER TO: XXXX

  TYPE: 9    1=U.S. SAVINGS BOND (SERIES E AND EE)
             2=U.S. SAVINGS BOND (SERIES H AND HH)
             3=OTHER BOND
             4=STOCK
             5=MUTUAL FUND

  DESCRIPTION: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
               XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

  IF TYPE IS 2, 3 OR 5,  EARNS INTEREST (Y/N): X
  IF TYPE IS 4 OR 5,  EARNS DIVIDENDS (Y/N): X

  CO-OWNED (Y/N): X                            PASS EXCLUSION (Y/N): X

  SET ASIDE FOR BURIAL (Y/N): X

  RESOURCE DISPOSAL AGREEMENT (Y/N): X      PROOF OF DISPOSAL (Y/N): X

  ANOTHER SOURCE (Y): X      DELETE THIS SOURCE (Y): X         REMARKS (Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS                   STOCKS AND BONDS              PAGE   OF RSTB
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                        TRANSFER TO: XXXX

 RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
 CO-OWNER
 (Y/N) FROM TO    NAME
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X    9999 9999  SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
  X                OTHER CO-OWNERS


 ANOTHER SOURCE (Y): X                             REMARKS (Y): X
```

SCREEN FACSIMILE 3:

```
MSSICS                 STOCKS AND BONDS                PAGE   OF RSTB
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                    TRANSFER TO: XXXX

  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  SPECIFY OTHER CO-OWNER:

  FROM   TO    NAME

  9999   9999   XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999   9999   XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999   9999   XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999   9999   XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX




 ANOTHER SOURCE (Y): X                              REMARKS (Y): X
```

SCREEN FACSIMILE 4:

```
MSSICS                  STOCKS AND BONDS               PAGE   OF RSTB
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                        TRANSFER TO: XXXX

  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS


  NAME FOR WHOM HELD: XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXX XXXX

  MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
     LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X

  DATE ASSET SET ASIDE (MMDDYY): 999999

  RESOURCE EARNS INTEREST (Y/N): X
     IF RESOURCE EARNS INTEREST, INTEREST REMAINS IN FUND (Y/N): X




 ANOTHER SOURCE (Y): X                                 REMARKS (Y): X
```

SCREEN FACSIMILE 5:

```
MSSICS                   STOCKS AND BONDS              PAGE   OF RSTB
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                       TRANSFER TO: XXXX
  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

   FROM     TO     ALLEGED    VERIFIED             EXCLUDED    COUNTABLE
   (MMYY)  (MMYY)   VALUE      VALUE                AMOUNT       AMOUNT
   PPPP    PPPP   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
   9999    9999   999999999  999999999            999999999   SSSSSSSSS
 EXCLUSION REASON: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 ANOTHER SOURCE (Y): X      CONTINUATION SHEET (Y): X        REMARKS (Y): X
```

http://policynet.ba.ssa.gov/msom.nsf/lnx/MSSICS019013

Changes October 2007

- Revised field [2-O] to read: SELECT TO GO TO DETAIL SCREEN: 99
- Changed field [3-D] NUMBER to a 2-position field.
- Added new field [6-O] MORE (Y):

SCREEN FACSIMILE:

```
 MSSICS    POTENTIAL ELIGIBILITY FOR OTHER BENEFITS STATUS    PAGE 1 OF BLST
   SSS-SS-SSSS   SSSSS SSSSSSSSSS                              TRANSFER TO:
XXXX

     SELECT TO GO TO DETAIL SCREEN: 99
   NUMBER        SCREEN NAME                                            STATUS
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S
     SS           SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS          S


                                                          MORE (Y):
```

   SSS-SS-SSSS   SSSSS SSSSSSSSSS   TRANSFER TO:
XXXX

     SELECT TO GO TO DETAIL SCREEN: 99
   NUMBER   SCREEN NAME   STATUS
     SS   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS   S
     SS   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS   S
     SS   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS   S
     SS   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS   S

Changes September 2008

FACSIMILE 3 - IMEN Menu for Individuals:

For field [2-M] SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE YOU
RECEIVED OR EXPECT TO RECEIVE INCOME IN THE NEXT 14 MONTHS FROM
ANY OF THESE SOURCES(Y/N), modified the wording of one of the
types of income from SELF-EMPLOYMENT INCOME to SELF-EMPLOYMENT
INCOME PRIOR/CURRENT TAXABLE YEAR.

FACSIMILE 15 and S. FACSIMILE 16 – IMEN Menu for Multiples:

For field [8-M] SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE ANY
OF THE FOLLOWING PEOPLE RECEIVED OR EXPECT TO RECEIVE INCOME IN
THE NEXT 14 MONTHS FROM ANY OF THESE SOURCES, modified the
wording of one of the types of income from SELF-EMPLOYMENT
INCOME to SELF-EMPLOYMENT INCOME PRIOR/CURRENT TAXABLE YEAR

SCREEN FACSIMILE 1:

```
 MSSICS                          INCOME MENU                 PAGE 1 OF IMEN
  SSS-SS-SSSS  SSSSS SSSSSSSSSS                              TRANSFER TO:
XXXX

  SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE ANY OF THE FOLLOWING PEOPLE
  RECEIVED OR EXPECT TO RECEIVE INCOME IN THE NEXT 14 MONTHS FROM ANY OF
  THESE SOURCES:
  01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS) 07=(NAME REL SSSS)
  02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS) 08=(NAME REL SSSS)
  03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS) 09=(NAME REL SSSS)

  (Y/N)
   X       SSI
               02:   03:   04:   05:   06:   07:   08:   09:
   X       STATE OR LOCAL ASSISTANCE BASED NEED
           01:   02:   03:   04:   05:   06:   07:   08:   09:
   X       REFUGEE CASH ASSISTANCE
           01:   02:   03:   04:   05:   06:   07:   08:   09:
   X       AFDC
           01:   02:   03:   04:   05:   06:   07:   08:   09:
   X       GENERAL ASST FROM BUREAU OF INDIAN AFFAIRS
           01:   02:   03:   04:   05:   06:   07:   08:   09:
   X       DISASTER RELIEF
           01:   02:   03:   04:   05:   06:   07:   08:   09:
   X       VA BASED ON NEED (PAID DIRECTLY OR INDIRECTLY AS A DEPENDENT)
           01:   02:   03:   04:   05:   06:   07:   08:   09:
```

```
 MSSICS          PUBLIC MAINTENANCE/TITLE IV-D QUESTIONS    PAGE 2 OF IMEN
  SSS-SS-SSSS   SSSSS SSSSSSSSSS                             TRANSFER TO:
XXXX

  01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS) 07=(NAME REL SSSS)
  02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS) 08=(NAME REL SSSS)
  03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS) 09=(NAME REL SSSS)

  (Y/N)
   X        HAVE ANY OF THE LISTED PEOPLE RECEIVED ANY OTHER INCOME?
              02:   03:   04:   05:   06:   07:   08:   09:


            SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE ANY OF THE LISTED
PEOPLE

            RECEIVED OR EXPECT TO RECEIVE IN THE NEXT 14 MONTHS:
   X        SOCIAL SECURITY
            01:   02:   03:   04:   05:   06:   07:   08:   09:


   X        HAVE ANY OF THE LISTED PEOPLE RECEIVED AND EXPECT TO CONTINUE
            RECEIVING WITHOUT INTERRUPTION THE PAYMENTS LISTED ABOVE?
              02:   03:   04:   05:   06:   07:   08:   09:


   X        DOES ANYONE MAKE ANY SUPPORT PAYMENTS UNDER A COURT ORDER OR
UNDER

            TITLE IV-D?
              02:   03:   04:   05:   06:   07:   08:   09:
```

SCREEN FACSIMILE 3:

  SSS-SS-SSSS SSSSS SSSSSSSSSS   TRANSFER TO:
XXXX

 01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS) 07=(NAME REL SSSS)
 02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS) 08=(NAME REL SSSS)
 03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS) 09=(NAME REL SSSS)

 (Y/N)

          CR WANTS TO DO FULL DEVELOPMENT
               02:   03:   04:   05:   06:   07:   08:   09:

SCREEN FACSIMILE 4:

  SSS-SS-SSSS   SSSSS SSSSSSSSSS   TRANSFER TO:
XXXX

  SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE ANY OF THE FOLLOWING PEOPLE
  RECEIVED OR EXPECT TO RECEIVE INCOME IN THE NEXT 14 MONTHS FROM ANY OF
  THESE SOURCES:
  01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS) 07=(NAME REL SSSS)
  02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS) 08=(NAME REL SSSS)
  03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS) 09=(NAME REL SSSS)
  (Y/N)
   X   OTHER INCOME BASED ON NEED
            01:   02:   03:   04:   05:   06:   07:   08:   09:
   X   BLACK LUNG
            01:   02:   03:   04:   05:   06:   07:   08:   09:
   X   RAILROAD BOARD BENEFITS
            01:   02:   03:   04:   05:   06:   07:   08:   09:
   X   VA PAYMENTS NOT BASED ON NEED (PAID DIRECTLY OR INDIRECTLY AS A
            DEPENDENT)
            01:   02:   03:   04:   05:   06:   07:   08:   09:
   X   OFFICE OF PERSONNEL MANAGEMENT
            01:   02:   03:   04:   05:   06:   07:   08:   09:
   X   PENSION
            01:   02:   03:   04:   05:   06:   07:   08:   09:

SCREEN FACSIMILE 5:

 SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE ANY OF THE FOLLOWING PEOPLE
 RECEIVED OR EXPECT TO RECEIVE INCOME IN THE NEXT 14 MONTHS FROM ANY OF
 THESE SOURCES:
 01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS) 07=(NAME REL SSSS)
 02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS) 08=(NAME REL SSSS)
 03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS) 09=(NAME REL SSSS)
 (Y/N)
  X   UNEMPLOYMENT COMPENSATION
          01:   02:   03:   04:   05:   06:   07:   08:   09:
  X   WORKERS' COMPENSATION
          01:   02:   03:   04:   05:   06:   07:   08:   09:
  X   INTEREST
          01:   02:   03:   04:   05:   06:   07:   08:   09:
  X   DIVIDENDS
          01:   02:   03:   04:   05:   06:   07:   08:   09:
  X   ROYALTIES/HONORARIA
          01:   02:   03:   04:   05:   06:   07:   08:   09:
  X   RENTAL/LEASE INCOME NOT FROM A TRADE OR BUSINESS
          01:   02:   03:   04:   05:   06:   07:   08:   09:
  X   ALIMONY
          01:   02:   03:   04:   05:   06:   07:   08:   09:

```
 MSSICS                         INCOME MENU                  PAGE 6 OF IMEN
  SSS-SS-SSSS  SSSSS SSSSSSSSSS                              TRANSFER TO:
XXXX


  SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE ANY OF THE FOLLOWING PEOPLE
  RECEIVED OR EXPECT TO RECEIVE INCOME IN THE NEXT 14 MONTHS FROM ANY OF
  THESE SOURCES:
  01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS)  07=(NAME REL SSSS)
  02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS)  08=(NAME REL SSSS)
  03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS)  09=(NAME REL SSSS)
  (Y/N)
   X         CHILD SUPPORT
             01:   02:   03:   04:   05:   06:   07:   08:   09:
   X         OTHER BUREAU OF INDIAN AFFAIRS INCOME
             01:   02:   03:   04:   05:   06:   07:   08:   09:
   X         SICK PAY RECEIVED (UNEARNED)
             01:   02:   03:   04:   05:   06:   07:   08:   09:
   X         SICK PAY RECEIVED (EARNED)
             01:   02:   03:   04:   05:   06:   07:   08:   09:
   X         WAGES
             01:   02:   03:   04:   05:   06:   07:   08:   09:
   X         SELF-EMPLOYMENT INCOME PRIOR / CURRENT TAXABLE YEAR
             01:   02:   03:   04:   05:   06:   07:   08:   09:
   X         OTHER INC OR SUPPORT NOT PREVIOUSLY MENTIONED
             01:   02:   03:   04:   05:   06:   07:   08:   09:
```

SCREEN FACSIMILE 7:

  SSS-SS-SSSS   SSSSS SSSSSSSSSS   TRANSFER TO:
XXXX

 01=(NAME RELATION SSSS) 04=(NAME RELATION SSSS) 07=(NAME REL SSSS)
 02=(NAME RELATION SSSS) 05=(NAME RELATION SSSS) 08=(NAME REL SSSS)
 03=(NAME RELATION SSSS) 06=(NAME RELATION SSSS) 09=(NAME REL SSSS)
 Y/N Additional Questions:

 X   PASS INPUT NEEDED
      01:   02:   03:   04:   05:   06:   07:   08:   09:
 X   SCHOOL INPUT NEEDED
      01:   02:   03:   04:   05:   06:   07:   08:   09:
 X   BLIND COUNTABLE INCOME NEEDED (WELFARE CONVERSION)
      01:          03:
 X   DISPLAY INCOME SUMMARY SCREEEN
      01:   02:   03:   04:   05:   06:   07:   08:   09:

```
MSSICS                        INCOME MENU                PAGE 1 OF IMEN
  SSS-SS-SSSS  SSSSS SSSSSSSSSS                          TRANSFER TO:
XXXX


  SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE YOU RECEIVED OR EXPECT TO
  RECEIVE INCOME IN THE NEXT 14 MONTHS FROM ANY OF THESE SOURCES:

  (Y/N)
  X    SSI
  X    STATE OR LOCAL ASSISTANCE BASED ON NEED
  X    REFUGEE CASH ASSISTANCE
  X    AFDC
  X    GENERAL ASST FROM BUREAU OF INDIAN AFFAIRS
  X    DISASTER RELIEF
  X    VA BASED ON NEED (PAID DIRECTLY OR INDIRECTLY AS A    DEPENDENT)
  X    *HAVE YOU RECEIVED ANY OTHER INCOME
  X    SOCIAL SECURITY
  X    *HAVE YOU RECEIVED AND EXPECT TO CONTINUE RECEIVING WITHOUT
         INTERRUPTION THE PAYMENTS LISTED ABOVE
  X    *Do you have any support payments under a court order or under
         title IV-D
```

*These questions can appear for an individual who was part of a multiple menu
but will NOT appear for an individual who was not originally part of a multiple
menu (i.e. claimant only).

SCREEN FACSIMILE 9:

```
 MSSICS                          *INCOME MENU              PAGE 2 OF IMEN
   SSS-SS-SSSS   SSSSS SSSSSSSSSS                          TRANSFER TO:
 XXXX


   (Y/N)

            CR WANTS TO DO FULL DEVELOPMENT
```

*This screen can appear for an individual who was part of a multiple menu
but
 will NOT appear for an individual who was not originally part of a multiple
 menu (i.e. claimant only).

SCREEN FACSIMILE 10:

   SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE YOU RECEIVED OR EXPECT TO
RECEIVE
   INCOME IN THE NEXT 14 MONTHS FROM ANY OF THESE SOURCES:

   (Y/N)
    X   OTHER INCOME BASED ON NEED
    X   BLACK LUNG
    X   RAILROAD BOARD BENEFITS
    X   VA PAYMENTS NOT BASED ON NEED (PAID DIRECTLY OR INDIRECTLY AS A
             DEPENDENT)
    X   SOCIAL SECURITY
    X   OFFICE OF PERSONNEL MANAGEMENT
    X   PENSION
    X   UNEMPLOYMENT COMPENSATION
    X   WORKERS' COMPENSATION
    X   INTEREST
    X   DIVIDENDS
    X   ROYALTIES/HONORARIA
    X   RENTAL/LEASE INCOME NOT FROM A TRADE OR BUSINESS
    X   ALIMONY

```
MSSICS                         INCOME MENU                    PAGE 4 OF IMEN
  SSS-SS-SSSS   SSSSS SSSSSSSSSS                              TRANSFER TO:
XXXX

   SINCE THE FIRST MOMENT OF SS/01/SSSS, HAVE YOU RECEIVED OR EXPECT TO
   RECEIVE INCOME IN THE NEXT 14 MONTHS FROM ANY OF THESE SOURCES:

   (Y/N)
    X         CHILD SUPPORT
    X         OTHER BUREAU OF INDIAN AFFAIRS INCOME
    X         SICK PAY (UNEARNED)
    X         SICK PAY (EARNED)
    X         WAGES
    X         SELF-EMPLOYMENT INCOME PRIOR / CURRENT TAXABLE YEAR
    X         OTHER INC OR SUPPORT NOT PREVIOUSLY MENTIONED
```

SCREEN FACSIMILE 12:

  (Y/N) ADDITIONAL QUESTIONS:

   X   PASS INPUT NEEDED
        01:
   X   SCHOOL INPUT NEEDED
        01:
   X   BLIND COUNTABLE INCOME (WELFARE CONVERSION)
        01:
   X   DISPLAY INCOME SUMMARY SCREEN:
            01:

Changes June 2008

- Changed field name for [10-M] from FREQUENCY: (W,BW,M,SM,BM,Q,SA,A) to FREQ.
- Added new field, [12-C] REPORTED AMOUNT, to page 1 and page 2 of the IWAG screen.
- Added a separate field for frequency types, [17-C] FREQUENCY TYPES W=WEEKLY BW=BI-WEEKLY M=MONTHLY SM=SEMI-MONTHLY BM=BI-MONTHLY Q=QUARTERLY SA= SEMI-ANNUALLY A=ANNUALLY.
- FIELD DESCRIPTIONS: Added explanation for field [12-C] REPORTED AMOUNT.


```
MSSICS                        WAGES                      PAGE 1 OF IWAG
  SSS-SS-SSSS  SSSSS SSSSSSSSSS
TRANSFER TO: XXXX

  EMPLOYER NAME: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX  EIN:
999999999
  EMPLOYER ADDRESS: XXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXX
                    XXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXX
  CONTACT: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX  PHONE: 999
999 9999
     PROJECTION DATE LAST/NEXT PAID SS/SS/SSSS, FREQUENCY SS
  FROM TO     FREQ   ALLEGED    REPORTED    VERIFIED   DEDUCTIONS
POSTED
                     AMOUNT      AMOUNT      AMOUNT      (Y):
AMOUNT
  PPPP PPPP   XX   99999999    99999999    99999999      X
SSSSSSSS
  9999 9999   XX   99999999    99999999    99999999      X
SSSSSSSS
  9999 9999   XX   99999999    99999999    99999999      X
SSSSSSSS
  9999 9999   XX   99999999    99999999    99999999      X
SSSSSSSS
  9999 9999   XX   99999999    99999999    99999999      X
SSSSSSSS
    IF FREQUENCY IS NOT MONTHLY - DATE LAST/NEXT PAID (MMDDYY):
999999
   FREQUENCY TYPES  W=WAGES BW=BI-WEEKLY M=MONTHLY SM=SEMI-
MONTHLY
                 BM=BI-MONTHLY Q=QUARTERLY SA=SEMI-ANNUALLY
A=ANNUALLY

  CONTINUATION SHEET (Y): X
  ANOTHER SOURCE(Y): X        DELETE THIS SOURCE(Y): X
```

REMARKS (Y): X

  SSS-SS-SSSS SSSSS SSSSSSSSSS
TRANSFER TO: XXXX

  INCOME TYPE: SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
  FROM TO   FREQ   ALLEGED   REPORTED   VERIFIED   DEDUCTIONS
POSTED
                            AMOUNT   AMOUNT   AMOUNT   (Y):
AMOUNT
  PPPP PPPP   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
  9999 9999   XX   99999999   99999999   99999999   X
SSSSSSSS
    IF FREQUENCY IS NOT MONTHLY - DATE LAST/NEXT PAID (MMDDYY):
999999
   FREQUENCY TYPES W=WAGES BW=BI-WEEKLY M=MONTHLY SM=SEMI-
MONTHLY
                 BM=BI-MONTHLY Q=QUARTERLY SA=SEMI-ANNUALLY
A=ANNUALLY

  ANOTHER CONTINUATION SHEET (Y): X
  ANOTHER SOURCE (Y): X
REMARKS (Y): X

  SSS-SS-SSSS SSSSS SSSSSSSSSS
TRANSFER TO: XXXX

			GARNISHED FOR COURT ORDERED OR IV-D		OTHER
		BEFORE DEDUCTION	SUPPORT		DEDUCTION
FROM	TO	AMOUNT	AMOUNT:		AMOUNT:
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999
SS/SS	SS/SS	SSSSSSSSS	99999999		99999999

  OTHER DEDUCTION AMOUNT REASON:
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

MORE (Y): S

REMARKS (Y): X

MORE (Y): S

REMARKS (Y): X

Changes June 2007
- RELATIONSHIP TO CLAIMANT [5-O] changed to MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, MOTHER, FATHER, MOTHER'S SPOUSE, FATHER'S SPOUSE, CHILD, CHILD'S SPOUSE, SIBLING, SIBLING'S SPOUSE) (Y/N): X [5-M]
- Changed naming convention for field [4-M] NAME FOR WHOM HELD (separate input lines for first name, middle name, last name, and suffix)
- Removed field [6-O] IF OTHER, SPECIFY RELATIONSHIP.
- Changed all field numbers subsequent to IF OTHER, SPECIFY RELATIONSHIP down by 1.

SCREEN FACSIMILE 1:

```
MSSICS            BURIAL SPACES AND RELATED ITEMS           PAGE 1 OF RBSI
 SSS-SS-SSSS   SSSSS SSSSSSSSS                              TRANSFER TO: XXXX

  SELECT ITEM: 9  1=CEMETERY LOT    2=CRYPT    3=CASKET    4=URN
                  5=HEADSTONE       6=MARKER   7=OTHER

    IF OTHER, SPECIFY: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

  NAME FOR WHOM HELD: XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XXXX

  MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, MOTHER, FATHER,
     MOTHER'S SPOUSE, FATHER'S SPOUSE, CHILD, CHILD'S SPOUSE, SIBLING,
     SIBLING'S SPOUSE) (Y/N): X




  CO-OWNED (Y/N): X

  RESOURCE DISPOSAL AGREEMENT(Y/N): X    PROOF OF DISPOSAL(Y/N): X

  ANOTHER SOURCE (Y): X      DELETE THIS SOURCE (Y): X          REMARKS (Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS            BURIAL SPACES AND RELATED ITEMS        PAGE _ OF RBSI
 SSS-SS-SSSS  SSSSS  SSSSSSSSSS                          TRANSFER TO: XXXX

 RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
 CO-OWNER
 (Y/N) FROM  TO   NAME
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X     9999  9999 SSSSSSSSSSSSSSS SSSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X                OTHER CO-OWNERS

 ANOTHER SOURCE (Y): X                                   REMARKS (Y): X
```

SCREEN FACSIMILE 3:

```
MSSICS           BURIAL SPACES AND RELATED ITEMS          PAGE _ OF RBSI
 SSS-SS-SSSS  SSSSS  SSSSSSSSSS                           TRANSFER TO: XXXX

 RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

 SPECIFY OTHER CO-OWNERS:

 FROM  TO    NAME
 S
 9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
 9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
 9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
 9999  9999  XXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX



 ANOTHER SOURCE (Y): X                                    REMARKS (Y): X
```

```
MSSICS           BURIAL SPACES AND RELATED ITEMS         PAGE _ OF RBSI
 SSS-SS-SSSS  SSSSS   SSSSSSSSSS                        TRANSFER TO: XXXX
 RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  FROM   TO     ALLEGED     VERIFIED     LOAN       EXCLUDED     COUNTABLE
 (MMYY) (MMYY)   VALUE       VALUE      AMOUNT       AMOUNT       AMOUNT
  PPPP   PPPP  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS
  9999   9999  999999999   999999999   999999999   999999999    SSSSSSSSS

 EXCLUSION REASON:  XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 ANOTHER SOURCE (Y): X     CONTINUATION SHEET (Y): X         REMARKS (Y): X
```

http://policynet.ba.ssa.gov/msom.nsf/lnx/MSSICS013006

Changes June 2007

- Changed [13-M] SET ASIDE FOR BURIAL OF to [14-M] MEETS
  EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER,
  LIVING WITH FATHER).
- Changed [14-C] IF OTHER, NAME to [13-M] NAME FOR WHOM HELD.

SCREEN FACSIMILE 1:

```
 MSSICS                      CASH                     PAGE 1 OF RCSH
  SSS-SS-SSSS   SSSSS SSSSSSSSSS                       TRANSFER TO:
XXXX
   RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
   SET ASIDE FOR BURIAL (Y/N): X      PASS EXCLUSION (Y/N): X
    FROM      TO          ALLEGED       EXCLUDED        COUNTABLE
   (MMYY)    (MMYY)        VALUE         AMOUNT          AMOUNT
    PPPP      PPPP       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    9999      9999       999999999     999999999      SSSSSSSSSS
    EXCLUSION REASON: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
                           CONTINUATION SHEET (Y): X           REMARKS
(Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS                        CASH                   PAGE   OF RCSH
  SSS-SS-SSSS   SSSSS SSSSSSSSSS                     TRANSFER TO:
XXXX
  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

   FROM      TO           ALLEGED        EXCLUDED       COUNTABLE
  (MMYY)   (MMYY)          VALUE          AMOUNT         AMOUNT
   PPPP     PPPP         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
   9999     9999         999999999      999999999      SSSSSSSSSS
  EXCLUSION REASON: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
                         CONTINUATION SHEET (Y): X          REMARKS
(Y): X
```

SCREEN FACSIMILE 3:

```
 MSSICS                          CASH                    PAGE _ OF RCSH
  SSS-SS-SSSS   SSSSS SSSSSSSSSS                         TRANSFER TO:
XXXX

   RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS


   NAME FOR WHOM HELD: XXXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXX
XXXX

   MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
      LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X

   DATE ASSET SET ASIDE (MMDDYY): 999999
```

Changes June 2007

- Changed [22-M] SET ASIDE FOR BURIAL OF to [23-M] MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE, LIVING WITH MOTHER, LIVING WITH FATHER).

- Changed [23-C] IF OTHER, NAME to [22-M] NAME FOR WHOM HELD.

SCREEN FACSIMILE 1:

```
 MSSICS             FINANCIAL INSTITUTION ACCOUNTS           PAGE 1 OF RFIA
  SSS-SS-SSSS  SSSSS SSSSSSSSSS                            TRANSFER TO: XXXX
  TYPE OF ACCOUNT: 9   1=CHECKING         5=TIME DEPOSIT
                       2=SAVINGS          6=INDIVIDUAL INDIAN MONEY ACCOUNT
                       3=CREDIT UNION     7=OTHER
                       4=CHRISTMAS CLUB
     IF OTHER,  SPECIFY: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

  EARNS INTEREST (Y/N): X

    ACCOUNT NUMBER: 99999999999999999999
  INSTITUTION NAME: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
           ADDRESS: XXXXXXXXXXXXXXXXXXXX   XXXXXXXXXXXXXXXXXXXX
                    XXXXXXXXXXXXXXXXXXXX   XXXXXXXXXXXXXXXXXXXX

  CO-OWNED (Y/N): X   SET ASIDE FOR BURIAL (Y/N): X   PASS EXCLUSION (Y/N): X

  RESOURCE DISPOSAL AGREEMENT (Y/N): X    PROOF OF DISPOSAL (Y/N): X

  ANOTHER SOURCE (Y): X      DELETE THIS SOURCE (Y): X        REMARKS (Y): X
```

SCREEN FACSIMILE 2:

```
MSSICS              FINANCIAL INSTITUTION ACCOUNTS          PAGE   OF RFIA
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                              TRANSFER TO: XXXX

 RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
CO-OWNER
(Y/N) FROM  TO     NAME
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSX SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X    9999  9999   SSSSSSSSSSSSSS SSSSSSSSSSSSSS SSSSSSSSSSSSSSSSSSSS SSSS
 X                 OTHER CO-OWNERS

 ANOTHER SOURCE (Y): X                              REMARKS (Y): X
```

<u>SCREEN FACSIMILE 3:</u>

```
MSSICS              FINANCIAL INSTITUTION ACCOUNTS           PAGE   OF RFIA
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                         TRANSFER TO: XXXX

  RESOURCE ID   SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  SPECIFY OTHER CO-OWNERS:

  FROM   TO    NAME
  9999  9999   XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999  9999   XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999  9999   XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX
  9999  9999   XXXXXXXXXXXXXXX XXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXX XXXX




  ANOTHER SOURCE (Y): X                                REMARKS (Y): X
```

SCREEN FACSIMILE 4:

```
MSSICS           FINANCIAL INSTITUTION ACCOUNTS          PAGE   OF RFIA
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                            TRANSFER TO: XXXX

  RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS


  NAME FOR WHOM HELD: XXXXXXXXXXXXXXX XXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XXXX

  MEETS EXCLUSION RELATIONSHIP (CLAIMANT, SPOUSE,
     LIVING WITH MOTHER, LIVING WITH FATHER) (Y/N): X

  DATE ASSET SET ASIDE (MMDDYY): 999999


  RESOURCE EARNS INTEREST (Y/N): X
     IF RESOURCE EARNS INTEREST, INTEREST REMAINS IN FUND (Y/N): X



  ANOTHER SOURCE (Y): X                                    REMARKS (Y): X
```

<u>SCREEN FACSIMILE 5:</u>

```
MSSICS              FINANCIAL INSTITUTION ACCOUNTS           PAGE   OF RFIA
 SSS-SS-SSSS  SSSSS SSSSSSSSSS                               TRANSFER TO: XXXX
  RESOURCE ID  SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS

  FROM    TO     ALLEGED      VERIFIED              EXCLUDED    COUNTABLE
 (MMYY)  (MMYY)   VALUE        VALUE                 AMOUNT      AMOUNT
  PPPP    PPPP   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
  9999    9999   999999999    999999999             999999999   SSSSSSSSS
 EXCLUSION REASON:XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
 ANOTHER SOURCE (Y): X     CONTINUATION SHEET (Y): X          REMARKS (Y): X
```