Social Society Online numerocology

Internet Representative Payee Accounting (iRPA)



Welcome to Internet Representative Payee Accounting

To get started

You will need to have the report that you received in the mail in order to access your beneficiary's records. For security reasons, we will request information regarding unique codes on your report.

Completing your report

You must complete this report in one sitting. Your information will not be saved if you do not complete your online report. However, you may always log-in in the future and start your report from the beginning.

When you finish

After you have completed your accounting update, you will be given a confirmation number for your reference. This information will be saved for 30 days in our records for your review.

	Start the Payee Accounting Update Process
	The following pages will guide you through updating your records with Social Security.
	Log in
	Register ID
	We estimate that it will take about 15 minutes to read the instructions, gather the facts, and answer the questions.
	Social Security is required by sections 205(j) and 1631(a) of the Social Security Act to ask you to complete the report. The information you provide enables SSA to account for the beneficiary's payments, and ensures that beneficiary needs are being met. If you do not complete this report, we may not be able to continue sending the beneficiary's payments to you. For more information go to the
9	Privacy and Paperwork Reduction Act Statements.
	OMB No. 0960-618

iRPA Access Screen

Access Beneficiary Data Access Accounting Access Accounting Access the period you want to update, you must enter information from the Representative Payee Report mailed to you by SSA for that reporting period. Access the period you want to update, you must enter information from the Representative Payee Report. Use the codes written on the actual report you every active drom SSA. Access the period you want to update, you must enter information from the Representative Payee Report. Use the codes written on the actual report you every active drom SSA. Access the period you want to update, you must enter information from the Actual report you access and the SSN, ID. TAA, and BIC codes on a sample Representative Payee Report. Use the codes written on the actual report you access and the measure of the SSN, ID. TAA, and BIC codes on a sample Representative Payee Report. Use the codes written on the actual report you access and the measure of the SSN, ID. TAA, and BIC codes on a sample Representative Date of the SSN, ID. TAA, and BIC codes appear on the report, you must enter these codes. Access and enter your codes (not the sample codes) into the below fields. If the ID and BIC codes appear on the report, you must enter them. <u>More mine (access) into the sample codes into the below fields. If the ID and BIC codes appear on the report, do not enter them. <u>More mine (access) into the below fields. If the ID and BIC codes (not the sample codes) into the below fields. If the ID and BIC codes (not the sample codes) into the below fields. If the ID and BIC codes into the sample codes into the set of the sample (access) into the below fields. If the ID and BIC codes (not the sample codes) into the below fields. If the ID and BIC codes is appear on the report. If the ID and BIC codes (not the sample codes) into the below fields. If the ID and BIC codes (not the sample codes) into the below fields. If the ID and BIC codes (not appear on the report) (cod</u></u>	21 	Interne	Represer	itative F	ayee	Acco	unting	(iRP/	X)
EFF Accounting Saving	og Out	/ گ	ccess Be	neficia	ry Dat	ta			
All Representative Payee Report malled to you by SSA for that reporting period. The picture below shows the locations of the SSN, ID. TAA, and BIC codes on a sample Representative Payee Report. Use the codes written on the actual report you received from SSA. WITE NUM ENDORSH WIDENT PERIOD WIDENT PERIOD WIDENT PERIOD POR POR WIDENT PERIOD WIDENT PERIOD WIDENT POR POR WIDENT PERIOD WIDENT PERIOD WIDENT POR POR WIDENT PERIOD WIDENT PERIOD WIDENT PERIOD POR POR WIDENT PERIOD WIDENT PERIOD WIDENT POR WIDENT PERIOD WIDENT WIDENT WIDENT POR WIDENT WIDENT WIDENT WIDENT PIEASE enter the information requested below exactly as it appears on the Representative Payee Report	EP:	e Access	Accounting	Sevin	93	() Summa	9. 9.	Continuit	
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Now locate and enter your codes (not the sample codes) into the below fields. ITEM 1: SSN ITEM 3: ID (six digit format) ITEM 4: BIC	Payee NOTE • If th	Report you recei	ved from Social es appear on th	Security. e report, yo	u mus t e	enter the	se codes		ative
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	C	Cancel				<< Pt	evious)	Next >	

iRPA Accounting Screen

	Abcounting		ummary 🔲 Confirmation	
PAYEE JOHN SMITH 1234 ANYPLACE RD ANYTOWN, MD 21000 <u>change</u>	06/01/	RT PERIOD 2006 TO: 07/31/2007	BENEFICIARY RANDAL SIMMONS XXX-8789	
SIMMONS. You are re	equired to comp	lete this form. More	for the beneficiary, RANDAL information links are available stions that you may have.	
Your Job Title		(payee's	s job title)	
Your Daytime Phone Number		(include	area code)	
	مام منائدة من مناه	no on with the same	names or in the name institution	
		ne, or with the same	person, or in the same institution	
from 08/01/2006 to 07/		ne, or with the same	person, or in the same institution	
from 08/01/2006 to 07/		ne, or with the same	person, or in the same institution	
tom 08/01/2006 to 07/ O Yes O No Street Address Line Street Address Line		ne, or with the same	person, or in the same institution	
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: 1

iRPA Savings Page

		Summary Cont	meton
PAYEE JOHN SMITH 1224 ANYPLACE RD ANYTOWN, MD 21009 <u>chance addres</u>	REPORT PERIOD 08/01/2006 TO 07/31/2007 39	BENEFICIARY RANDAL SIMM	DNS XXX-XX-6789
dicate how you are saving an one account, you may n heck all that apply:		e beneficiary. If you hav	re more
Savings or Checking Account	US Savings Bonds	Certificates of Deposit	
Collective Savings or Collective Checking Account	Treasury Bills	Coher	
dicate the type of account	z iznacionale rationale en en 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	anayo I I	
ow is the title of the accoun	it listed?		
Your Name for Randal Simmons) Your Name for Beneficiary's Name	(Randal Simmons by Your Name Beneficiary's Name by Your Name	ə) () Other	
low is the account tilled? [, <u> </u>	^ :	
eneral Remarks (if any)			

iRPA Report Summary Screen

Out }		Te Re	port Sun	nmary		
	Access	Accounting	Savings	Summary	Confirmati	C11
	TH PLACE RD I, MD 21000 <u>ch</u>	0	EPORT PERIOD 101/2005 TO \$7/31	/2007	BENEFICIARY RANDAL SIMMONS	XXX-XX-6789
	Carefully r	eview the followin	g information f	or accuracy and n	nake any edits if n	ecessary.
Edit	The benefic	any did continue to	live with you at t	he same residence o	r institution.	
Edit	You (the pe	iyee) did decide how	r the \$6,197 was a	ipent or saved.		
Edit	\$5,100 was	spent for food and h	ousing for the ber	eficialy.		
Edit	\$1,085 was	spent on other expe	nses for the bene	ficiary.		
Edit	\$1255 was	saved for the benefic	iary.			
Edit	The \$1255	is being saved In a s	avinga account.			
Edit	The name I	isted on this account	is Randal Simmo	MS .		
<u>Edit</u>	Your title (ti	ne payee) is Admini (strator.			
Edit	The daytim	e phone number whe	re you can be rea	ched is 410-555-100 0).	
if 1	the above info	I, JOHN SMITH, information on th and correct to th gives a false or r	declare under pe lis form, and on ar e best of my know nisleading statem	ny accompanying stal redge. I understand t ent about a material fi	have examined all the ements or forms, and that anyone who know act in this information.	it is true vingly , or
	n	other penalties, o After y back to	or both. I ou submit this	report you will no e that you have ca		F 1806
] I agree that the a	ibove statement is	s true.		
		Cancel				

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iRPA Confirmation Screen

	*	nfirmation	
	Accounting	V Savings V Su	mmary Continuation
ATEE ICHN SMITH 234 ANTPLACE RD WYTCWN, MD 21000		2006 TO 07/31/2007	RANDAL SIMMONS XXX-XX-6789
Your accounting rec reporting period of (ve been updated for the
There is no need to your review online fo			formation will be available for
You may print or do	wnload this p	bage for your record	s, log out, or file another report.
Download this Pag	<u>16</u>		
Print this Page			
Your Confirmation n Today's Date: 01/08 The beneficiary has mo	/2008		
320 Crambrook Drive	1		
Cockeysville, MD 21030			
Cockeysville, MD 21030 Randal Simmons moved	d in with his sister		
Cockeysville, MD 21030 Randal Simmons moved You (the payee) did deci	d in with his sister ide how the \$6,1	97 was spent or saved.	
Cockeysville, MD 21030 Randal Simmons moved You (the payee) did deci \$5,100 was spent for foo	d In with his sister ide how the S6,19 d and housing for	97 was spent or saved. r the beneficiary.	
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http://mwww.ba.ssa.gov/hlp/irpa/10/hlp-irpa001-acr.htm

Access Code Definitions



Last reviewed or modified Monday Mar 17, 2008

HLP-IRPA001-ACR

SSN - Social Security Number (the number holder's Social Security number on whose account benefits are payable)

TAA - Total Accountable Amount (the amount of money you received on behalf of the beneficiary plus any saved funds that were reported on the last accounting report)

ID - Individual Recipient Information this code identifies the type of SSI eligibility and type of recipient)

BIC - B eneficiary Identification Code (this code identifies the type of Social Security benefits payable)

Close this window

http://mwww.ba.ssa.gov/hlp/irpa/10/hlp-irpa002-addr.htm

Address Change

Last reviewed or modified Wednesday Mar 19, 2008



HLP-IRPA002-ADDR

Please call SSA at 1-800-772-1213 or visit your local field office to update your address. You can only update the beneficiary's address on the online accounting report.

Close this window

Privacy and Paperwork Reduction Act Statements

Last reviewed or modified Wednesday Mar 19, 2008



The law sometimes requires us to give out the facts on this form without your consent. The information must be released to another person or government agency if Federal law requires the information for research and audits in order to administer or improve our representative payee program.

We may also use the information you give us when we match records by computer. Matching programs compare our records with those of other Federal, State, or local government agencies. Many agencies may use matching programs to find or prove that a person qualifies for benefits paid by the Federal government. The law allows us to do this even if you do not agree to it. Explanations about these and other reasons why information you provide us may be used or given out are available in Social Security offices. If you want to learn more about this, contact any Social Security office.

This information collection 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 answer these questions unless we display a valid Office of Management and Budget (OMB) control number. You may send comments on our time estimate to: Social Security Administration, 6401 Security Blvd, Baltimore, MD 21235-0001. Send only comments on our time estimate to this address, not the completed form.

<u>Close this window</u>

See Revised Privacy Act and Paperwork Reduction Act Statements attached.

Error 1: Strike 1 error - form not found (Pop-up window overlays existing screen)

an the second	Internet Representative Payee Accounting (iRPA)
	Your record has not been found
	We are sorry for the inconvenience, but we cannot match the information you have provided with our records. Please check your records again for accuracy. If the information that you have provided is correct, then it may be necessary to correct your Social Security record. Please call 1-800-772-1213 or contact your local Social Security office if you require further assistance. If you are deaf or hard of hearing, call our toll-free "TTY" number, 1-800-325-0778 .

Error 2: Strike 2 error – form not found (Pop-up window overlays existing screen)

na sa sa	Internet Representative Payee Accounting (iRPA)
	Your record has not been found
	We still cannot match the information you have provided with our records. Please check your records once again for accuracy. If the information that you have provided is correct, then it may be necessary to correct your Social Security record. Please call 1-800-772-1213 or contact your local Social Security office if you require further assistance. If you are deaf or hard of hearing, call our toll-free "TTY" number, 1-800-325-0778 .
	Close



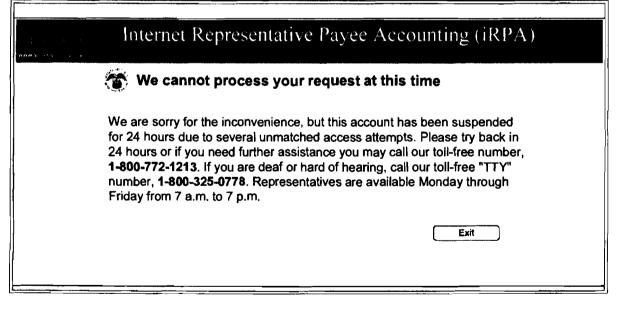
Page 1

F

Error 3: Strike 3 error - form not found (Full Window/ New Screen)

AND STREET	Internet Representative Payee Accounting (iRPA)
	You have reached the limit on number of requests
	We are sorry for the inconvenience, but after several attempts we cannot match the information you have provided with our records. You may return after 24 hours of inactivity. If the information that you have provided is correct, then it may be necessary to correct your Social Security record. Please call 1- 800-772-1213 or contact your local Social Security office. If you are deaf or hard of hearing, call our toll-free "TTY" number, 1-800-325-0778 .

Error 4: Re-entry after lock out (Full Window/ New Screen)





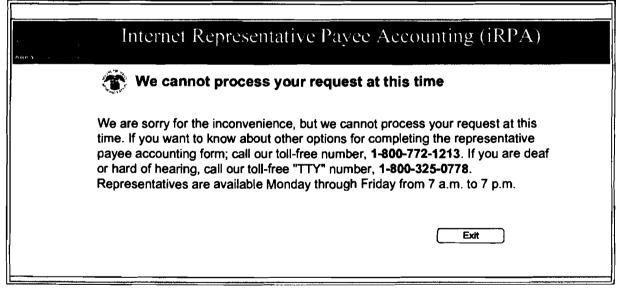
Page 2

71

Errors 5&9: Previously submitted report (Full Window/ New Screen)

an y Ana an an an an an an	Internet Representative Payee Accounting (iRPA)
	This record has already been submitted
	A Representative Payee Accounting form has already been submitted to Social Security for this claimant. If you have new information, you must contact us. We cannot accept additional information over the Internet. Call our toll-free number, 1-800-772-1213 . If you are deaf or hard of hearing, call our toll-free "TTY" number, 1-800-325-0778 . Representatives are available Monday through Friday from 7 a.m. to 7 p.m.
	Exit

Error 6: Non-responder (Full Window/ New Screen)





Error 7: Rep	Payee Number not equal to IRES Rep Payee SSN (Pop-up Overlays existing screen)
t Norganisa tumu Xana ang Pangaran	Internet Representative Payee Accounting (iRPA)
	Check the Social Security Number you entered
	The Social Security Number you entered for registration access does not match the Social Social Security number of the Internet Representative Payee Accounting form you are trying to access.
	Please check this number:
	If you typed the wrong number, you will need to correct it before continuing.
	If this is the claimant's correct Social Security Number, you may complete the paper Representative Payee Accounting form.
	Close

Error 10: Cancel or previous on accounting screen button use (Pop-up window overlays existing screen)

 Internet Representative Payee Accounting (iRPA)
 Your information will not be saved
You are now leaving the application and your information will not be saved. Use the cancel button to return to your session.
Cancel Exit



Error 11: Check the amounts you have entered (Pop-up window overlays existing screen)

Check the amounts you have entered for accounting
The amounts that you have entered do not add up to the Total Accountable Amount (TAA). Would you like to correct these amounts?
Yes



SSA will insert the following revised Privacy Act and PRA Statements into the form as soon as possible:

Privacy Act Statement Collection and Use of Personal Information

Sections 205 and 1631(a) of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may result in a delay in ensuring you are using the money you receive from us for the beneficiary's benefit.

We will use the information to ensure the beneficiary's payments are being properly used and managed. We may also share your information for the following purposes, called routine uses:

- 1. To third party contacts that may have information relevant to the Social Security Administration's establishment or verification of information provided by representative payees or payee applicants.
- 2. To contractors and other Federal Agencies, as necessary, for the purpose of assisting the SSA in the efficient administration of its programs. We will disclose information under this routine use only in situations in which SSA may enter into a contractual or similar agreement to obtain assistance in accomplishing an SSA function relating to this system of records; and
- 3. To a claimant or other individual authorized to act on his or her behalf information concerning the status of his or her representative payee or the status of the application of a person applying to be his or her representative payee, and information pertaining to the address of a representative payee applicant or a selected representative payee when this information is needed to pursue a claim for recovery of misapplied or misused benefits.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notices (SORN) 60-0090, entitled Master Beneficiary Record; 60-0103, entitled Supplemental Security Income Record and Special Veterans Benefits; and 60-0222, entitled Master Representative Payee File. Additional information and a full listing of all our SORNs are available on our website at www.socialsecurity.gov/foia/bluebook.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the <u>Paperwork Reduction Act of 1995</u>. You do not need to answer these questions unless we display a valid Office of Management and Budget

(OMB) control number. We estimate that it will take about 15 minutes to read the instructions, gather the facts, and answer the questions. *Send <u>only</u> comments relating to our time estimate above to*: *SSA*, 6401 Security Blvd, Baltimore, MD 21235-6401.