

SSI Claim Screen Package Deferred Claim

5/20/2021

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A. Log in Information

1. Claims Home

This page is used to input a Social Security Number (SSN) to establish or review claim(s).

Note: “* indicates required information” means the fields are mandatory.

Consolidated Claims Experience

Claims Home

* Indicates required information

* Office Code
999

* Social Security Number (SSN)

Next Exit

2. Claims Summary

The Claims Summary page allows you to view, manage, and establish claims.

The screenshot shows a web interface titled "Consolidated Claims Experience" with a home icon. The main heading is "Claims Summary". Below this is a table with two columns: "Requested Social Security Number (SSN)" and "Name". The table is currently empty. Underneath the table, there are two sections: "T2/T18 Claims" and "T16 Claims". The "T2/T18 Claims" section contains a cyan message: "CCE Exclusion. This individual has not attained 64 and 8 months of age. To take appropriate action, select Exit and go to MCS." The "T16 Claims" section contains a cyan message: "Requested SSN has no active claim file or Supplemental Security Income Record. To establish a new claim, select 'Establish New SSI Claim' button below." Below this message is a button labeled "Establish New SSI Claim". At the bottom left of the page is an "Exit" button.

B. General Identification

1. Person Information

Person Information captures and displays data related to an individual's identity, contact information, citizenship, military service, and special accommodation needs. The Person Information page enables the user to view, and when applicable, update an individual's information. It also displays death information.

SSI Claims

Go To **General Identification** Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information**
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Person Information on Record for

Identity Information [Edit](#)

Social Security Number:
Multiple SSN(s):
Name:
Other Names:
Sex:
Birth Date:
Birth Place:
Birth Date Proof:
Birth Date Proof Type:
Parent/Mother's Name at Her Birth:
Parent/Father's Name:

Go to [Social Security Number Application Process \(SSNAP\)](#) to update identity information, when required evidence is available.
Go to [NUMI Query](#) to view the historical enumeration information.

Death Information [Edit](#)

No death information exists for this person.

Citizenship Information [Edit](#)

Citizenship Details

Citizenship Country	U.S. Citizenship Basis	U.S. Citizenship Proof	Start Date	End Date

Contact Information [Edit](#)

Addresses on Record

Address	Purpose	Effective Date
	Most Recently Provided Mailing T16 Mailing	

Primary Phone Number:
TTY Number:
Receive Text Message:
Receive Voice Message:
Primary Phone Number Remarks:
Alternate Phone Number:
TTY Number:
Receive Text Message:
Receive Voice Message:
Alternate Phone Number Remarks:
Email:
Spoken Language Preference:
Written Language Preference:
Special Notice Option:

[Go to iAccommodate to update SNO.](#)

Military Service Information

Department of Defense (DoD) Wounded Warrior:
Veterans Affairs 100% Permanent and Total Disability Compensation Rating:

Accommodation Information [Edit](#)

Add or update notice option due to visual impairment?
 Yes No

Active Accommodations

Active Accommodations	Request Date
No records found.	

Non-Standard Accommodations

Non-Standard Accommodations	Request Date	Status
No records found.		

[Accept](#)

Next Previous Save & Exit

a. Identity Information editing

SSI Claims

Go To **General Identification** Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Identity Information

* Indicates required information

Social Security Number

* Name Type

Full Name

Single Name

* Name

* First Middle * Last Suffix

Other Names - Alleged Names [More Info](#)

Maximum of 5 Other Names can be entered

Other Name Type	First Name	Middle Name	Last Name	Suffix	Action
No records found					

[Add Other Name](#)

Other Names - Official Information on Record [More Info](#)

Other Name Type	First Name	Middle Name	Last Name	Suffix
No records found.				

* Sex

Male Female

* Birth Date

mm/dd/yyyy

* Birth Place

U.S. or U.S. Territory International

* City/Town * State/Territory

* Birth Date Proof [More Info](#)

* Birth Date Proof Type [More Info](#)

* Parent/Mother's Name Type

Full Name

Single Name

Name Unknown

* Parent/Mother's Name at Her Birth

* First Middle * Last Suffix

* Parent/Father's Name Type

Full Name

Single Name

Name Unknown

* Parent/Father's Name

* First Middle * Last Suffix

[Save](#) [Cancel](#)

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list:

-
- JR
- SR
- I
- II
- III
- IV
- V
- VI
- VII
- VIII
- IX
- X
- XI
- XII
- XIII
- XIV
- XV
- XVI
- XVII

Birth Date Proof

-
- Age established for SSA purposes in a prior claim which warrants current coding of "F" according to POMS GN 00302.011 (F)
- Age established, but no other code applies (Q)
- Alleged (A)
- Convincing Proof (C)
- Preferred Proof (Public or religious record of age established before age 5) (B)

Birth Date Proof Type

-
- Hospital Birth Record (H)
- Notification of Birth Registration (N)
- Other Evidence of Age (including religious records) (O)
- Pre-age 5 State, Local or Foreign Public Birth Certificate (P)

b. Citizenship Information editing

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Next Previous Save & Exit

Social Security Number Name

Citizenship Information

Citizenship Details

Citizenship Country	U.S. Citizenship Basis	U.S. Citizenship Proof	Start Date	End Date	Action
					<input type="button" value="Edit"/> <input type="button" value="Delete"/>

Modal window:

Add Citizenship Information

* Indicates required information

* **U.S. Citizenship**

Yes No

* **U.S. Citizenship Basis**

--

* **U.S. Citizenship Proof**

--

* **Citizenship Start Date**

This date can typically be a birthdate

mm/dd/yyyy

* **Citizenship Ended**

Yes No

Dropdown list:

U.S. Citizenship Basics

—
Birth in U.S. U.S. Citizen Born Outside U.S. Naturalization, Granted by Court, Department of Homeland Security, or Presidential Proclamation

U.S. Citizenship Proof

—
Allegation No Proof Enumeration Record Prior Social Security Claim with Proven Citizenship U.S. Passport Birth/Baptismal Record Naturalization Record Certificate of Citizenship Consular Report of Birth Abroad (FS-240) Other Certification of Report of Birth (DS-1350)

c. Contact Information editing

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Person Information

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Social Security Number Name

Contact Information

* Indicates required information

Addresses on Record [More Info](#)

Address	Purpose	Effective Date	Action
	Most Recently Provided Mailing		Edit
	T16 Mailing		

[Manage Addresses](#)

Primary Phone Number

U.S. International

10-digit Number

TTY Number

Yes No

Receive a message on this phone by one or more of the following methods

Select All Options

Receive Text Message

Receive Voice Message

Primary Phone Number Remarks
(250 characters maximum)

Characters remaining: 250

Alternate Phone Number

U.S. International

10-digit Number

TTY Number

Yes No

Receive a message on this phone by one or more of the following methods

Select All Options

Receive Text Message

Receive Voice Message

Alternate Phone Number Remarks
(250 characters maximum)

Characters remaining: 250

Email

*Spoken Language Preference

*Written Language Preference

Special Notice Option
None

[Save](#) [Cancel](#)

[Next](#) [Previous](#) [Save & Exit](#)

Modal Window:

Add New Address

***Address**

***Country**

***Line 1** **Line 2**

Line 3 **Line 4**

***City/Town** ***State/Territory**

***ZIP Code**

State and County Code

***Apply this Address to all applicable purposes**
 T16 Mailing

Edit T16 Mailing

Manage Addresses

*** Indicates required information**

***Select one of the addresses below or enter a new address**

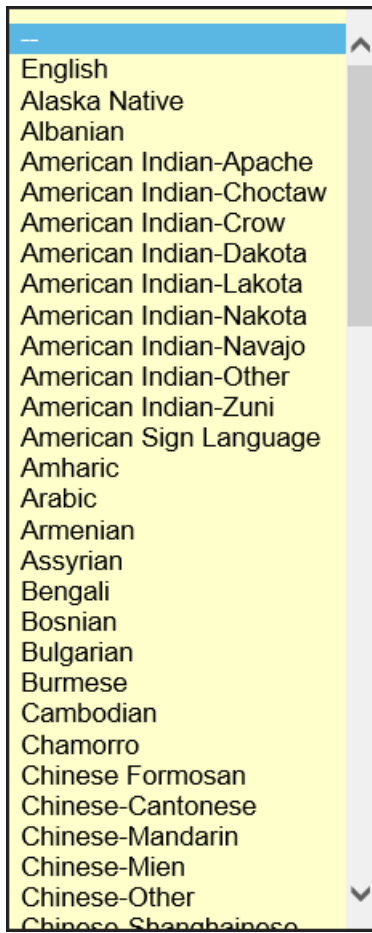
Add New Address

Mailing Address you entered

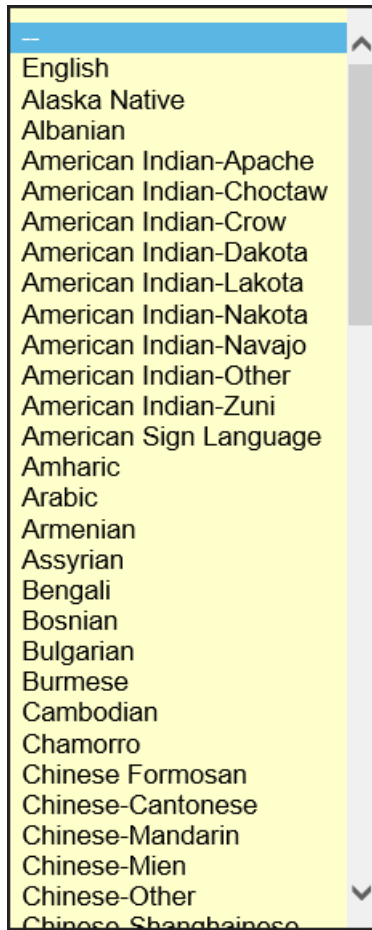
***Apply this Address to all applicable purposes**
 T16 Mailing

Dropdown list:

Spoken Language Preference

- 
- English
 - Alaska Native
 - Albanian
 - American Indian-Apache
 - American Indian-Choctaw
 - American Indian-Crow
 - American Indian-Dakota
 - American Indian-Lakota
 - American Indian-Nakota
 - American Indian-Navajo
 - American Indian-Other
 - American Indian-Zuni
 - American Sign Language
 - Amharic
 - Arabic
 - Armenian
 - Assyrian
 - Bengali
 - Bosnian
 - Bulgarian
 - Burmese
 - Cambodian
 - Chamorro
 - Chinese Formosan
 - Chinese-Cantonese
 - Chinese-Mandarin
 - Chinese-Mien
 - Chinese-Other
 - Chinese-Shanghaiese

Written Language Preference



A scrollable list of written language preferences. The list is contained within a rectangular box with a light yellow background and a grey scrollbar on the right side. The top of the list is highlighted in blue. The list items are as follows:

- English
- Alaska Native
- Albanian
- American Indian-Apache
- American Indian-Choctaw
- American Indian-Crow
- American Indian-Dakota
- American Indian-Lakota
- American Indian-Nakota
- American Indian-Navajo
- American Indian-Other
- American Indian-Zuni
- American Sign Language
- Amharic
- Arabic
- Armenian
- Assyrian
- Bengali
- Bosnian
- Bulgarian
- Burmese
- Cambodian
- Chamorro
- Chinese Formosan
- Chinese-Cantonese
- Chinese-Mandarin
- Chinese-Mien
- Chinese-Other
- Chinese-Shanghaiese

d. Accommodation Information editing

SSI Claims
Go To

 General Identification
 Living Arrangements
 Resources
 Income
 Benefit Leads
 Summary
 Claim Edits and Alerts

Person Information

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents
- Marriage (0)
- Holding Out (0)

Social Security Number **Name**

Request For Reasonable Accommodation

1 Provide Information 2 Review Information 3 Confirmation

Paperwork Reduction Act | Privacy Act

Request Information

*Request Date

*Office Code where accommodation is requested

Please select, enter, or modify, at least one of the accommodation options listed below. Select the associated impairment type.

Accommodation Approved Today

Hide Special Notice Options

Special Notice Options [Help](#)

Complete this section when a notice accommodation is requested by or for a claimant, beneficiary, applicant, recipient, or representative payee who is blind or visually-impaired. NOTE: Organizational representative payees ARE NOT eligible for special notice options. If none of these options are adequate, please visit the [SNO Website](#).

For Applicants, Beneficiaries, Recipients or Representative Payees
Policy information relating to SNO can be referenced from [POMS](#) [HALLEX](#) [TSCOG](#)

- Standard print notices sent by first-class mail
- Standard print notices sent by certified mail
- Standard print notices sent by first-class mail and a follow-up telephone call within 5 business days to read the client the notice
- Standard print notices and Braille notices sent by first-class mail
- Standard print notices and data compact discs (CDs) that contain a Microsoft Word file sent by first-class mail
- Standard print notices and audio compact discs (CDs) that contain a voice recording of the notice sent by first-class mail
- Standard print notices and large print (18-point font) notices sent by first-class mail

Impairment Type

Use the "Non-Standard Accommodations" section below when a special notice option is requested by or for

- Someone other than a claimant, beneficiary, applicant, recipient, or individual representative payee, or
- Is based on an impairment other than blindness or visual impairment.

Hide Standard Accommodation

Standard Accommodation [Help](#)

If required, select one or more Standard Accommodation(s).

Standard Accommodation	Impairment Type	Provided
<input type="checkbox"/> Test standard Accommodation creation with maximum input values allowed with accommodation name for local individuals located within in the city and the area limit	--	<input type="checkbox"/>
<input type="checkbox"/> test accommodation	--	<input type="checkbox"/>
<input type="checkbox"/> Certified and Qualified Sign Language Interpreter	--	<input type="checkbox"/>
<input type="checkbox"/> Certified and Qualified Video Remote Sign Language Interpreter (VRI)	--	<input type="checkbox"/>
<input type="checkbox"/> Handwritten notes	--	<input type="checkbox"/>
<input type="checkbox"/> Lip reading or speech reading	--	<input type="checkbox"/>

Hide Locally-Available Accommodation

Locally-Available Accommodation [Help](#)

If required, select one or more Locally-Available Accommodation. (These may not be available in every office.)

Locally-Available Accommodation	Impairment Type	Provided
<input type="checkbox"/> xxxxxx	--	<input type="checkbox"/>
<input type="checkbox"/> test	--	<input type="checkbox"/>
<input type="checkbox"/> aaaaa	--	<input type="checkbox"/>
<input type="checkbox"/> Social Security employee who is a Qualified Sign Language Interpreter	--	<input type="checkbox"/>
<input type="checkbox"/> Social Security employee who knows American Sign Language (ASL)	--	<input type="checkbox"/>
<input type="checkbox"/> CapTel service	--	<input type="checkbox"/>
<input type="checkbox"/> Real-time Court Reporting	--	<input type="checkbox"/>
<input type="checkbox"/> UbiDuo face-to-face communicator	--	<input type="checkbox"/>

Hide Other Accommodation

Other Accommodation [Help](#)

If required, describe any other accommodation that SSA can provide today. Only document accommodations provided by SSA.

Other Accommodation	Impairment Type	Provided	Actions
<input type="text"/>	--	<input type="checkbox"/>	<input type="button" value="Remove"/>

If none of the above accommodations meet the requirement, please create Non Standard Accommodation by clicking on below button.

17

Dropdown list:

Impairment Type

-
- Blind or Visually Impaired
- Deaf or Hard of Hearing
- Cognitive or Learning
- Mobility or Physical
- Psychological or Emotional
- Other

2. Supplemental Security Income Application - Deferred

This page collects the type of application being processed, and the date the claim was established. Additionally, it collects information about the non-claimant applicant.

The screenshot shows the 'Supplemental Security Income Application' form. The top navigation bar includes 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The form is divided into a left sidebar with a 'General Identification' menu and a main content area. The menu items include: Person Information, SSI Application (checked), Disability (checked), Multiple SSNs (checked), Residency & Presence in the U.S. (checked), Advance Designation, Financial Permission, Personal Information Authorization, Wage Authorization, Felony Warrant (checked), Child's Parents (checked), Marriage (0) (checked), and Holding Out (0) (checked). The main content area contains several required fields: 'Application type' (dropdown menu with 'Deferred' selected), 'Protective filing date' (text input field), 'Effective filing date' (text input field), and 'Applicant type' (dropdown menu). Below these fields are expandable sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). At the bottom of the form are buttons for 'Next', 'Previous', 'Save & Exit', and 'Undo Changes'.

Dropdown list:

Application Type

—
Abbreviated
Deferred
Full

Applicant Type

—
Agency
Claimant
Other Individual

More Info link:

Application type ✕

Select an Application Type of:

- 'Full' for claims involving simultaneous development. See [POMS SI 00603.002 Explanation of Deferred and Simultaneous Development](#) for more information.
- 'Deferred' for claims that do not meet requirements for simultaneous development. See [POMS SI 00603.002.C Explanation of Deferred and Simultaneous Development](#) for more information.
- 'Abbreviated' to formally deny Title XVI benefits for certain nonmedical reasons when the applicant alleges information that clearly results in ineligibility. See [POMS SI 00602.001 The Abbreviated Application Process](#) for more information.

Close

Protective filing date ✕

The Protective filing date documents the claimant's first date of inquiry with an intent to apply for SSI benefits. See [POMS GN 00204.010 Protective Filing](#) for more information.

Close

Effective filing date ✕

The Effective Filing Date documents the date the claimant or claimant spouse files an application for SSI benefits. In most cases it will be the same as the Protective Filing Date. See [POMS SI 00601.009 Application Effective Date](#) for more information.

Close

3. Disability

This page documents the allegation of disability or blindness, the onset date alleged by the individual, the SSA employee's decision regarding the disposition of the medical portion of the file, and the date the field office sent the file for a medical decision.

Once in the path, this page remains in the path and the user cannot remove the page.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Disability

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- Person Information
- SSI Application
- Disability**
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Indicates required information

Allegations

Disabled

Yes No

Blind or low vision [More Info](#)
Includes blindness and severe visual impairment even with glasses or contacts

Yes No

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

Refer case for medical decision is No

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edit and Alerts

Disability

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

General Identification

- Person Information
- SSI Application
- Disability
 - Multiple SSNs
 - Residency & Presence in the U.S.
 - Advance Designation
 - Financial Permission
 - Personal Information Authorization
 - Wage Authorization
 - Felony Warrant
 - Marriage (0)
 - Holding Out (0)

Indicates required information

Allegations

* Disabled Yes No

* Blind or low vision [More info](#)
Includes blindness and severe visual impairment even with glasses or contacts
 Yes No

* Alleged onset date
mm/dd/yyyy

* Disabled prior to age 22 Yes No Unknown

* Refer case for medical decision Yes No Decide later

Reason not referred

Show person remarks
No remarks

Show file documentation notes
No notes

Dropdown list:

Reason not referred

—
Adopt title II disability determination
Converted welfare case
Denied for non-medical reason

More Info link:

More Info - Blind or low vision



Statutory blindness:

- Central visual acuity of 20/200 or less in the better eye after best correction
- A limitation in the field of vision such that the widest diameter of the visual field subtends an angle no greater than 20 degrees in the better eye

Other considerations if blindness is established:

- No substantial gainful activity limitation applies see [POMS DI 10501.001 Meaning of SGA and Scope of Subchapter](#) ,
- [POMS DI 11005.070D Field Office Title II and Title XVI Disability Claims for Blindness and Visual Impairment Allegations](#) ,
- [POMS DI 26005.005B Title XVI Statutory Blindness Evaluation Issues](#)
- Blind work expenses are more favorable than income related work expenses because they reduce countable earnings dollar for dollar in SSI eligibility and payment computations, see [POMS SI 00820.535 Blind Work Expenses \(BWE\)](#)

Higher state supplements and multi-category eligibility are available in California, Iowa, and Nevada (as well as in Massachusetts prior to 04/01/2012) for statutorily blind recipients:

- [POMS SI 00501.300 Multicategory Eligibility - General Information](#)

More Info - Claim escalated



- When a claim for benefits based on disability under title II or title XVI is pending at the initial, reconsideration, or hearing level of review and a subsequent claim under the other title is filed, establish whether the claims share a common issue. If the claims share a common issue, consider escalating the claim. See [POMS DI 12045.010 Processing Disability Claims at Different Levels of Appeal, Title II and Title XVI - Common Issue Cases](#) for more information.
- Escalated claims are different from Military Casualty (MC)/Wounded Warrior (WW) cases. See [POMS DI 11005.006 Field Office \(FO\) Instructions for Claims Development and Processing for Military Casualty \(MC\)/Wounded Warrior \(WW\) Cases](#) for more information.

Close

4. Children in Deeming Unit

This page collects the number of ineligible children (including children eligible on their own records) who live with or have lived with the claimant since the date indicated.

The screenshot shows the 'Children in Deeming Unit' form within the SSI Claims application. At the top, there is a navigation bar with tabs for 'General Identification', 'Resources', 'Income', 'Summary', and 'Claim Edits and Alerts'. Below the navigation bar, the form title 'Children in Deeming Unit' is displayed. The form is divided into two main sections. On the left is a sidebar menu with options: 'General Identification' (checked), 'SSI Eligibility' (checked), 'Person Information' (unchecked), 'Children in Deeming Unit' (checked), 'Multiple SSNs' (checked), 'Sponsored Alien' (checked), 'Financial Permission' (unchecked), 'Personal Information Authorization' (unchecked), 'Wage Authorization' (unchecked), 'Marriage (1)' (checked), and 'Holding Out (0)' (checked). Below the sidebar are buttons for 'Next', 'Previous', and 'Save & Exit'. The main content area on the right contains a table with columns 'Name', 'Social Security Number (SSN)', and 'Role' (with a sub-label 'Ineligible Spouse'). Below the table, there is a section for 'General Identification' with a 'Number of children, other than the claimant, included in the deeming unit since 02/28/2008' field. A 'Children' table follows, with columns 'Child SSN' and 'Unknown', and checkboxes for each. There are also sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes), and an 'Undo Changes' button.

More Info link:

Children In Deeming Unit ✕

The number of children in the deeming unit should include the total number of children of deemors (ineligible spouse or parents) for this claim. Do not count the claimant. For initial claims the date displayed is the last day of the month before the month of the Effective Filing Date on the Supplemental Security Income Application page. For post eligibility claims, the date displayed is the last day of the month before the Pending File Begin Date, if present. Otherwise, the date will display the last day of the month before the Effective Filing Date on the Supplemental Security Income Application page.

Close

Dropdown list:

—
0
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
More than 25

5. Multiple SSNs

This page collects additional social security numbers that have either been used by or issued to the claimant, claimant spouse, living with parent, deemor children, sponsor, sponsor spouse and/or co-sponsor spouse.

Dropdown list:

Type

More Info link:

6. Alien Status

The purpose of this requirement is to determine each month if N13 (Not a citizen or lawfully admitted alien) applies. When N13 does not apply for the month, the person is considered qualified for SSI based on Alien Status. Note: All other factors of SSI eligibility must still be met.

SSi claims

[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Alien Status

Name	Social Security Number (SSN)	Role Claimant

General Identification

- [Person Information](#)
- [SSI Application](#)
- [Disability](#)
- [Multiple SSNs](#)
- [Alien Status](#)
- [Residency & Presence in the U.S.](#)
- [Payment Method](#)
- [Financial Permission](#)
- [Personal Information Authorization](#)
- [Felony Warrant](#)
- [Marriage \(0\)](#)
- [Holding Out \(0\)](#)
- [Sponsor](#)
- [Edits and Alerts](#)

*** Indicates required information**

*** U.S. admission date**
This is the most recent date the claimant entered the United States for residence purposes.

*** Country of origin**
This is the country where the Alien resided prior to entering the U.S., or from where the alien filed for refugee or other alien status prior to entering the U.S. It may or may not be the place of birth of the claimant.

*** Alien status** [List of Alien status codes](#) [Reference: SI 00502.100](#)

- Amerasian immigrant or Iraqi/Afghani special immigrant status
Class of admission: AM1, AM2, AM3, AM6, AM7, AM8. Class of admission Iraqi/Afghani special immigrant: SI1, SI2, SI3, SI6, SI7, SI8, SI9, SI22, SI23, SI24, SI25, SI26, SI27, SI28, SI29, SI30, SI31, SI32, SI33, SI34, SI35, SI36, SI37, SI38, SI39, SI40, SI41, SI42, SI43, SI44, SI45, SI46, SI47, SI48, SI49, SI50, SI51, SI52, SI53, SI54, SI55, SI56, SI57, SI58, SI59, SI60, SI61, SI62, SI63, SI64, SI65, SI66, SI67, SI68, SI69, SI70, SI71, SI72, SI73, SI74, SI75, SI76, SI77, SI78, SI79, SI80, SI81, SI82, SI83, SI84, SI85, SI86, SI87, SI88, SI89, SI90, SI91, SI92, SI93, SI94, SI95, SI96, SI97, SI98, SI99, SI100.
- Asylee, Section 208 of the Immigration and Nationality Act (INA)
Class of admission: AS1, AS2, AS3, AS5, AS7, AS9
- Battery, cruelty or Violence Against Women Act petitioner
Class of admission: IB1, IB2, IB3, IB6, IB7, IB8, IB9, IB10, IB11, IB12, IB13, IB14, IB15, IB16, IB17, IB18, IB19, IB20, IB21, IB22, IB23, IB24, IB25, IB26, IB27, IB28, IB29, IB30, IB31, IB32, IB33, IB34, IB35, IB36, IB37, IB38, IB39, IB40, IB41, IB42, IB43, IB44, IB45, IB46, IB47, IB48, IB49, IB50, IB51, IB52, IB53, IB54, IB55, IB56, IB57, IB58, IB59, IB60, IB61, IB62, IB63, IB64, IB65, IB66, IB67, IB68, IB69, IB70, IB71, IB72, IB73, IB74, IB75, IB76, IB77, IB78, IB79, IB80, IB81, IB82, IB83, IB84, IB85, IB86, IB87, IB88, IB89, IB90, IB91, IB92, IB93, IB94, IB95, IB96, IB97, IB98, IB99, IB100.
- Continuous U.S. residence since prior to 1/1/1972 (PRUCOL), not eligible unless receiving SSI on 8/22/1996 and continues to meet all eligibility factors
- Cuban or Haitian entrant
Class of admission: C7P, CC, CNP, CHE, CU0, CU5, CU7, CU8, CU9, CUP, HA6-HA9, HB6-HB9, HC5-HC9, HD6-HD9, HE6-HE9, NC6-NC9
- Deportation withheld under Section 241(b)(3) or removal withheld under Section 243(n) of the Immigration and Nationality Act (INA)
Class of admission: DAS, ENF, ERP, IJ, DE, DEFER
- Lawful permanent resident
Class of admission: IR3, FX3, DV1, AR1, AY1, DT1, E11, GA6, LA6, LB6, IMM, LPR, XB3 and including all values in other selections
- Lawful permanent resident, Immigration Reform and Control Act (IRCA) of 1986
- Lawful temporary resident, Immigration Reform and Control Act (IRCA) of 1986; not Special Agricultural Worker (SAW) or Replenishment Agricultural Worker (RAW)
Class of admission: LTR, TW1, TW2, TS1, TS2
- Legalized Special Agricultural Worker (SAW) or Replenishment Agricultural Worker (RAW), Immigration Reform and Control Act (IRCA) of 1986
Class of admission: S16, S26, S1W, S2W, TR1, TR2, RAW
- Parolee, Section 212(d)(5) of the Immigration and Nationality Act and not Cuban/Haitian entrant; not eligible unless receiving SSI on 8/22/1996 and continues to meet all eligibility factors
Class of admission: DE, CC, CH, CP, DA, DT, R3, R4, PR
- Refugee, Section 207 of the Immigration and Nationality Act (INA) or Section 203(a)(7) of the INA prior to 1/1/1980
Class of admission: Section 203(a)(7): R86, P7, P72, P75, P76, RRA, REF, Section 207: RE1-RE3, RE5-RE9, REF, RE, REUG
- Stay of deportation, non-qualified Alien
Class of admission: Z13, Z14, Z15, Z56, Z57
- Voluntary departure
Class of admission: FUG, VD
- No valid DHS status; alleges presence in the U.S. illegally or DHS unaware of presence
- Alleges valid DHS status; status unknown or no other applicable status
- Unknown

*** Alien status verified**
 Yes No

*** Alien receiving SSI benefits on 8/22/1996, and who has continued to meet all SSI eligibility factors** [More Info](#)
 Yes No Unknown

*** Refugee per Section 207**
 Yes No Unknown

Exception met

*** Sponsored at any time since 02/28/2012**
 Yes No Unknown

*** Sponsor type**
If sponsor type is employer and the employer is a relative of the claimant, select "person". If the employer is not related to the claimant, select "organization".

*** Sponsor signed a new version affidavit of support** [More Info](#)
A new version affidavit of support is a legally enforceable affidavit of support (DHS Form I-864 or similar form) used by DHS for applications for immigrant visas or for adjustments of status filed on or after 12/19/1997. New sponsor deeming rules apply.

Show person remarks
No remarks

Show file documentation notes
No notes

7. Residency and Presence in U.S.

This page collects residency and continuous presence in the U.S. data for a claimant during initial claim situations. The data collected, along with other required data, determines eligibility.

The screenshot shows the 'Residency and Presence in U.S. (Initial Claim)' form in the SSI Claims system. The top navigation bar includes 'Go To' and tabs for 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The form header displays 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. A left sidebar lists various identification categories, with 'Residency & Presence in the U.S.' selected. The main form area contains several sections: 'Indicates required information' with a 'Permanently lives within the 50 States, District of Columbia, or the Northern Mariana Islands' question (Yes/No/Unknown); 'First U.S. residency date' (mm/dd/yyyy) with an 'Unknown' option; 'Resided outside of the U.S. since 04/20/2021' (Yes/No/Unknown); and a table for 'Periods Resided Outside the U.S.' with columns for 'Date From (mm/dd/yyyy)', 'Date To (mm/dd/yyyy)', 'Unknown', and 'Actions' (Delete). Below the table are expandable sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). A 'Clear Page' button is at the bottom. Navigation buttons 'Next', 'Previous', and 'Save & Exit' are at the bottom left.

More info link:

Residency and Presence in U.S. (Initial Claim)

Developing Permanent Home ✕

Develop if claimant permanently lives in the U.S. for SSI purposes. For more information see [POMS SI 00501.400 Residence and Citizenship Requirement](#)

[Close](#)

8. Advanced Designation

SSI Advance Designation is a mini-path function in the SSI Claims system. Advance Designation is automatically placed in the SSI Claims path for the person on the claim when a new claim is established for the person on the claim. When accessing Advance Designation, the user is presented with the Advance Designation of Representative Payee application in establish, update or query mode.

The Advance Designation of Representative Payee application collects advance designation data for the applicants and beneficiaries who do not have a representative payee. If the time comes that they need a representative payee, individuals can be advance designated in priority order. The Advance Designation of Representative Payee application also allows applicants and beneficiaries who have a representative payee to update the phone number of any existing advance designations that are currently present in the application.

Optional for a deferred claim.

The screenshot displays the SSI Claims system interface. At the top, a navigation bar includes a 'Go To' dropdown and several menu items: General Identification, Living Arrangements, Resources, Income, Benefit Leads, Summary (highlighted), and Claim Edits and Alerts. Below the navigation bar, the page title is 'Advance Designation'. A table header shows 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. On the left, a sidebar menu lists various application sections: Person Information (selected), SSI Application, Disability, Multiple SSNs, Residency & Presence in the U.S., Advance Designation (selected), Financial Permission, Personal Information Authorization, Wage Authorization, Felony Warrant, Marriage (0), and Holding Out (0). The main content area is titled 'Advance Designation for HEATHER MARIE MOSHER'. It contains a red asterisk indicating required information, a red expandable section for 'Hide information about advance designation' with explanatory text, and a question: '* Would the individual like to advance designate at this time?' with radio buttons for 'Yes' and 'No'. A blue 'Next' button is located at the bottom of the form area.

9. Financial Institutions Permission

The Financial Institutions Permission page documents whether the claimant, eligible spouse, and deemors give permission to contact Financial Institutions.

SSI Claims

Go To: General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Financial Institutions Permission

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission**
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Next | Previous | Save & Exit

Financial Institutions Permission History

Indicates required information

Use the Add New Permission button to add a new permission response. Use the Edit button to correct an existing permission response.

Status	Permission Status	Collected Date (mm/dd/yyyy)	Ineligibility Notice Date (mm/dd/yyyy)	Actions
No records found.				

Add New Permission

Show person remarks
No remarks

Show file documentation notes
No notes

Clear Page

Modal Window:

Add New Permission

Permission

* Indicates required information

*** Permission to contact financial institutions**

Yes No Unknown

*** Collected date**

mm/dd/yyyy

OK Cancel

10. Personal Information Authorization

This page documents whether the claimant, eligible spouse, and members of the deeming unit give authorization for third parties to disclose their personal information to SSA.

SSI Claims

Go To: [General Identification](#) [Living Arrangements](#) [Resources](#) [Income](#) [Benefit Leads](#) [Summary](#) [Claim Edits and Alerts](#)

Personal Information Authorization

Optional authorization allowing third parties to release non-medical, non-financial institution information to SSA

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission

Person available to provide response [More info](#)

Yes No

Show person remarks
No remarks

Show file documentation notes
No notes

[Clear Page](#)

Personal Information Authorization

- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

[Next](#) [Previous](#) [Save & Exit](#)

More Info link:

Who May Consent ✕

For more information on who may consent, see [POMS GN 03305.005 Who May Consent](#)

[Close](#)

Modal Window:

“Person available to provide response” is Yes

Authorization Response

* Indicates required information

* Relationship of person providing response
--

* Name of person providing response

* First Middle * Last Suffix

* Authorization for disclosure of personal information to SSA
 Yes No

* Date response provided
mm/dd/yyyy

OK Cancel

Dropdown list:

Relationship of person providing response

--

Self
Parent of minor child
Legal guardian

11. Wage Authorization

SSI Wage Authorization is a mini-path function in SSI Claims system. Upon accessing the page, the user is presented with a data collection screen. The SSI Wage Authorization page interfaces with the Programmatic Wage Authorization application, which houses authorization responses and presents the appropriate response collection elements and information depending on the authorization response status and claim status of both Title 16 and Title 2. This function collects and/or displays information regarding authorization for SSA to obtain wage and employment information from third party providers for the claimant, eligible spouse, ineligible spouse, eligible child, ineligible child, parent, sponsor, sponsor spouse, and sponsor cosponsor.

The SSI Wage Authorization function is automatically placed in the SSI Claims system path when required by current Policy in Initial Claims, Preeffectuation Review Contact page, and Redetermination events. It is also available to the user in other SSI Claims system events upon request. SSI Wage Authorization allows the user to review and update Programmatic Wage Authorization status without having to exit the SSI Claims system application.

The screenshot shows the SSI Claims Wage Authorization form. At the top, there is a navigation bar with tabs for General Identification, Living Arrangements, Resources, Income, Benefit Leads, Summary, and Claim Edits and Alerts. Below the navigation bar, the form title is "Wage Authorization".

The form is divided into two main sections. On the left is the "General Identification" section, which includes a list of options: Person Information, SSI Application, Disability, Multiple SSNs, Residency & Presence in the U.S., Advance Designation, Financial Permission, Personal Information Authorization, Wage Authorization (selected), Felony Warrant, Marriage (0), and Holding Out (0). At the bottom of this section are "Next", "Previous", and "Save & Exit" buttons.

The right section is titled "Wage and Employment Information Authorization" and includes the following text: "Optional authorization allowing payroll data providers to release wage and employment information to SSA". Below this, there is a red asterisk indicating required information. The "Current Authorization Details" section shows two rows of data:

SSDI	Authorization status	Inactive
	Response date	--
	Attested date	--

SSI	Authorization status	Inactive
	Response date	--
	Attested date	--

Below the table, there is a question: "Person available to provide response in person, over the phone, or through a signed paper form" with radio buttons for "Yes" and "No". At the bottom of the form are "OK" and "Clear Page" buttons.

More Info link:

Current Authorization Details

Authorization Details ✕

Active - Individual has given a "Yes" response

Inactive - This status is displayed when:

1. Individual has not provided an authorization response
2. Individual has given a "No" response
3. Individual turned 18 and a new authorization request has not been made
4. Individual revoked his or her authorization
5. Individual is no longer considered a deemor for SSI purposes
6. Claim has been denied
7. Benefits have terminated

Authorization response date - The date when the individual provided a "Yes" or "No" response

Authorization terminated date - The date when the system terminates the authorization due to the following reasons:

1. Individual turned 18 and a new authorization request has not been made
2. Individual is no longer considered a deemor for SSI purposes
3. Claim has been denied

“Person available to provide response in person, over the phone, or through a signed paper form” is Yes

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Wage Authorization

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization**
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Wage and Employment Information Authorization

Optional authorization allowing payroll data providers to release wage and employment information to SSA

Indicates required information

Current Authorization Details [More Info](#)

SSDI	
Authorization status	Inactive
Response date	--
Attested date	--

SSI	
Authorization status	Inactive
Response date	--
Attested date	--

Person available to provide response in person, over the phone, or through a signed paper form [More Info](#)

Yes No

Relationship of person providing response

--

Name of person providing response

First Middle Last Suffix

Address of person providing response
If you update this address, it will be used only for the purpose of printed notice and will not be saved

Country
United States or U.S. Territory

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Authorization Response

Authorization to obtain wage and employment information from payroll data providers for SSI program

Yes No

SSI response date

mm/dd/yyyy

Attested this response

OK Clear Page

Next Previous Save & Exit

More Info link:

Who May Provide Authorization



An individual who is filing or receiving benefits may give us authorization to obtain his or her wage and employment records from any payroll data provider.

Additionally, for SSI, we will request authorization from anyone whose income and resources we consider when determining the individual's eligibility and payment amount.

Minor children, legally incompetent adults, and representative payees cannot give us authorization:

- If the individual is a minor child, then a parent or legal guardian must give us authorization on his or her behalf. The only exception is if the minor child is emancipated, then he or she can give authorization.
- If the individual is a legally incompetent adult, the legal guardian must give us authorization on behalf of the individual
- A representative payee can give authorization on behalf of the individual, only when the representative payee is the parent or legal guardian of the minor, or legal guardian of the incompetent adult

Close

Dropdown list:

—
Self
Parent of minor child
Legal guardian

12. Felony Warrant

These pages document the claimant's or eligible spouse's status as a Fugitive Felon or Parole Probation Violator.

This DFR documents two (2) separate pages:

- Felony Warrants
- Parole or Probation Violation Warrants

As a result of the Martinez Court Settlement, SSA will only suspend on the following felony arrest warrants:

- Escape from custody – Offense Code 4901
- Flight to avoid prosecution or confinement – Offense Code 4902
- Flight – escape – Offense Code 4999

As a result of the Clark Court order, SSA can no longer make initial determination to suspend or deny payments based on a Parole or Probation violations. Historical information will be displayed, but new claims will not include PPV questions.

The screenshot displays the SSI Claims application interface. At the top, a navigation bar includes a 'Go To' dropdown menu with options: General Identification, Living Arrangements, Resources, Income, Benefit Leads, Summary, and Claim Edits and Alerts. The main content area is titled 'Felony Warrant' and features a table with columns for Name, Social Security Number (SSN), and Role (Claimant). Below the table, a sidebar on the left lists various sections: General Identification (with sub-sections like Person Information, SSI Application, Disability, Multiple SSNs, Residency & Presence in the U.S., Advance Designation, Financial Permission, Personal Information Authorization, and Wage Authorization), Felony Warrant (selected), Marriage (0), and Holding Out (0). The main content area contains a form with a red asterisk indicating required information. The primary question is 'Accused or convicted of a felony or an attempt to commit a felony', with radio button options for Yes, No, and Unknown. Below this are expandable sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). A 'Clear Page' button is located at the bottom of the form. At the very bottom of the page, there are three buttons: 'Next', 'Previous', and 'Save & Exit'.

“Accused or convicted of a felony or an attempt to commit a felony” is Yes

SBI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edit and Alerts

Felony Warrant

Name Social Security Number (SSN) Role Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

* Indicates required information

Review this information before you continue

For Initial Claims, if "Yes" is displayed in any of the Felony questions, follow the Martinez Settlement guidelines in [CPOMS GN 02613.860 Martinez Court Case Settlement - Overview](#)

For Post Entitlement, if "Yes" is displayed in any of the felony questions, do not change them to "No" unless there is an erroneous fugitive felon suspension. Changes can cause improper overpayments or underpayments.

* Accused or convicted of a felony or an attempt to commit a felony

Yes No Unknown

* State or country

State/Territory Federal Jurisdiction or Country

* Federal Jurisdiction or Country

United States of U.S. Territory

* Since 04/29/2021, felony or arrest warrant [Click here first before adding a new Felony Warrant](#)

Yes No Unknown

Felony warrant

Do not change or delete existing warrant information unless there is an erroneous fugitive felon suspension

Status	Date Warrant issued (mm/dd/yyyy)	Warrant Satisfied	Date Warrant Satisfied (mm/dd/yyyy)	Good Cause	Actions
No records found.					

[Add Warrant](#)

✓ Show person remarks

No remarks

✓ Show file documentation notes

No notes

[Clear Page](#)

[Next](#) [Previous](#) [Save & Exit](#)

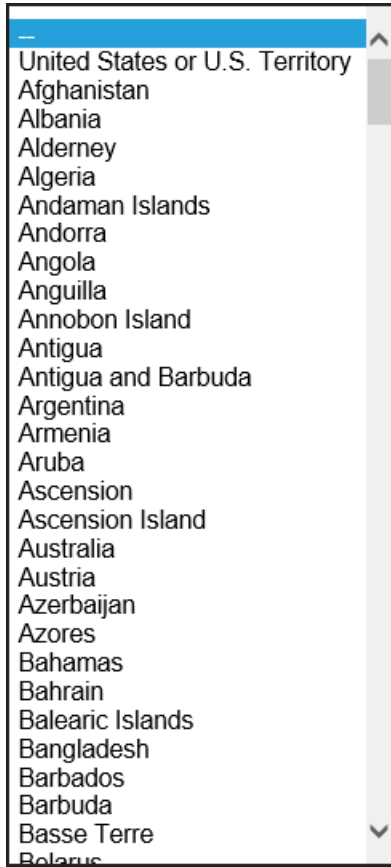
Dropdown list:

State or Country

State

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- Armed Forces Africa (AE)
- Armed Forces Americas (AA)
- Armed Forces Canada (AE)
- Armed Forces Europe (AE)
- Armed Forces Middle East (AE)
- Armed Forces Pacific (AP)
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine

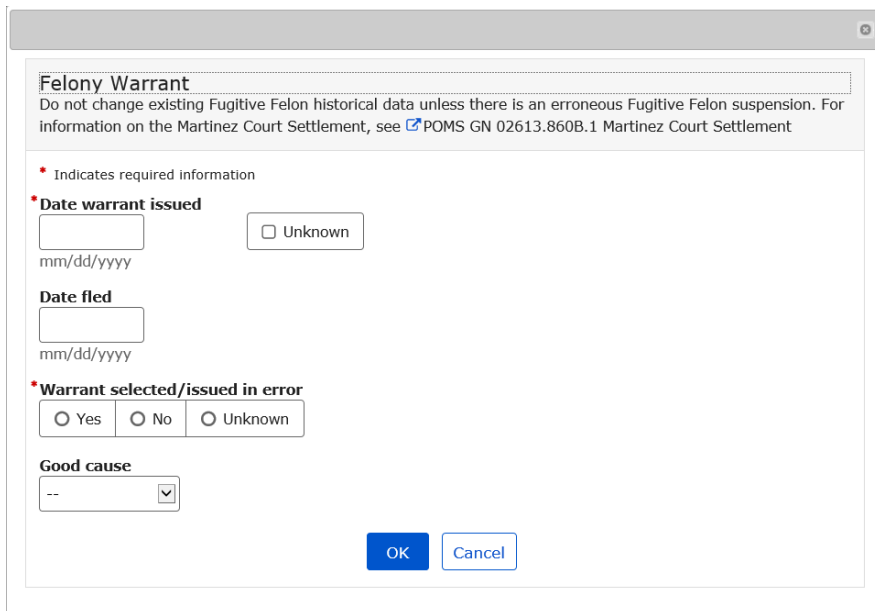
Federal Jurisdiction or Country



A dropdown menu with a scroll bar. The top item is highlighted in blue. The list includes: United States or U.S. Territory, Afghanistan, Albania, Alderney, Algeria, Andaman Islands, Andorra, Angola, Anguilla, Annobon Island, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ascension, Ascension Island, Australia, Austria, Azerbaijan, Azores, Bahamas, Bahrain, Balearic Islands, Bangladesh, Barbados, Barbuda, Basse Terre, and Belarus.

Modal Window:

Add Warrant



Felony Warrant
Do not change existing Fugitive Felon historical data unless there is an erroneous Fugitive Felon suspension. For information on the Martinez Court Settlement, see [POMS GN 02613.860B.1 Martinez Court Settlement](#)

* Indicates required information

* **Date warrant issued**
 Unknown
mm/dd/yyyy

Date fled

mm/dd/yyyy

* **Warrant selected/issued in error**
 Yes No Unknown

Good cause
 --

Dropdown list:

Good Cause

--
Established
Not established

13. Child's Parents

This page documents the SSNs of parents living with a child claimant who is under age 18 prior to the effective filing date. It also documents SSNs of non-deemor parents for a claimant who alleges becoming disabled prior to age 22. It also adds a lead on the Child's Entitlement from Parents page for deemor and non deemor parents.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Child's Parents

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Payment Method
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Child's Parents**
- Marriage (0)
- Holding Out (0)

Indicates required information

***Living with deemor parent(s) since 03/31/2021**

Yes No

Non Deemor parents

Non Deemor Parent SSN

Show person remarks

No remarks

Show file documentation notes

No notes

Clear Page

Next Previous Save & Exit

14. Marriage

The Marriage page captures and displays data related to marriages, which are active or terminated for all the people on the Person Claim Summary page. It establishes marital relationships and also collects the information about a separated/former spouse of the claimant. The information collected on the Marriage page is shared data among all claims where that person's SSN is active. The Marriage Information section of the Marriage page enables the user to view, and when applicable, update an individual's information. This information is collected in Person Information (PI).

SSI Claims

Go To

General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Marriage

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)**
- Holding Out (0)

Next Previous Save & Exit

Marriage Information

Social Security Number Name

Marriage Information

*Are you or have you ever been married?

Yes No

Marriage Details

Spouse Name	Spouse SSN	Spouse Birth Date / Age	Marriage Start Date	Marriage End Date	Reason Marriage Ended	Spouse Death Date	Action
No records found.							

Save Cancel

Add Marriage

SSI Claims

Go To [General Identification](#) [Living Arrangements](#) [Resources](#) [Income](#) [Benefit Leads](#) [Summary](#) [Claim Edits and Alerts](#)

Marriage

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- [Person Information](#)
- [SSI Application](#)
- [Disability](#)
- [Multiple SSNs](#)
- [Residency & Presence in the U.S.](#)
- [Advance Designation](#)
- [Financial Permission](#)
- [Personal Information Authorization](#)
- [Wage Authorization](#)
- [Felony Warrant](#)
- Marriage (0)**
- [Holding Out \(0\)](#)

Marriage Information

Social Security Number Name

Marriage Information

Enter current or any prior marriage or Non-Marital Legal Relationship information (NMLR). [More Info](#)

Spouse Social Security Number (SSN) [More Info](#)
Enter SSN to obtain spouse information on record.

[Get Spouse Information On Record](#)

Name Type

Full Name
 Single Name

Spouse Name

First **Middle** **Last** **Suffix**

Spouse Birth Date or Age
Birth Date is required. If Birth date is unknown, please enter Age.
Birth Date Age Unknown
mm/dd/yyyy

Marriage Date
 Unknown
mm/dd/yyyy

Place of Marriage

U.S. or U.S. Territory International

City/Town State/Territory

Marriage Type or Non-Marital Legal Relationship Information [More Info](#)

Special Relationships [More Info](#)
Special Relationships applies only for Title 2

Proof of marriage

Marriage Ended

Yes
 No
 Unknown

[Save](#) [Cancel](#)

[New](#) [Dismiss](#) [Save & Exit](#)

Dropdown list:

Suffix

—
JR
SR
I
II
III
IV
V
VI
VII
VIII
IX
X
XI
XII
XIII
XIV
XV
XVI
XVII

State/Territory

Alabama
Alaska
American Samoa
Arizona
Arkansas
California
Colorado
Connecticut
Delaware
District of Columbia
Federated States of Micronesia
Florida
Georgia
Guam
Hawaii
Idaho
Illinois
Indiana
Iowa
Kansas
Kentucky
Louisiana
Maine
Marshall Islands
Maryland
Massachusetts
Michigan
Minnesota
Mississippi

More Info link:

Marriage Information ✕
<p>Please use the Marriage Information questions to develop all relationships that may affect benefit entitlement.</p> <p>Marriage data that is input may be matched to previous data for the SSA official record and/or alleged data from previous data inputs.</p> <p>Please adhere to Privacy and Disclosure guideline in processing and communicating this data to the Claimant or any 3rd party representation.</p> <p>SI 00501.150 GN 01085.010</p>

Social Security Number (SSN) ✕

The Spouse SSN may or may not be required depending on the type of marriage information you will provide. However, providing the Spouse SSN is recommended as this will allow you to select certain data such as Name, Birthdate, Marriage date etc., that may be on record instead of typing it in.

Marriage Type ✕

More information about Marriage Types can be found in the following POMS links:

General Information About Determining Marital Status - [GN 00305.005](#)

Civil Union / Domestic Partnership - [GN 00210.004](#)

Common Law (non-ceremonial) Marriage - [GN 00305.075](#)

Deemed Marriage - [GN 00305.055](#)

Indian Tribal or Custom Marriage - [GN 00305.090](#)

Married by clergy or public official - [GN 00305.020](#)

Special Relationship ✕

Special Relationships only apply to Title 2.

For Special Relationships code details, refer to the following POMS links:

[MS 00705.007](#)

[SM 03020.040](#)

Reason Marriage Ended ✕

More information about Marriage Ended reasons can be found in the following POMS links:

Annulment, Death, Divorce - [GN 00305.120](#)

Putative - (for TII purposes only) [GN 00305.085](#)

Voided - [GN 00305.125](#)

Dropdown list:

Marriage Type or Non-Marital Legal Relationship Information

—
Civil Union Marriage
Common-Law (non-ceremonial) Marriage
Deemed Marriage
Domestic Partnership
Indian Tribal or Custom Marriage
Married by clergy or public official

Special Relationships

216B1
216F1
202C2
216K
216C2/G2

Reason Marriage Ended

Annulment
Death
Divorce
Putative
Voided

SSI Marriages - Marriage Summary

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Marriage

Name	Social Security Number (SSN)	Role Claimant
No records found.		

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Residency & Presence in the U.S.
- Advance Designation
- Financial Permission
- Personal Information Authorization
- Wage Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)

Next Previous Save & Exit

SSI Marriages

Marriage Summary

Select marriage if couple has lived together anytime since 04/20/2021

Spouse Name	Spouse SSN	Spouse Birth Date/Age	Marriage Start Date	Marriage End Date	Spouse Deceased
No Records Found					

Show person remarks
No remarks

Show file documentation notes
No notes

[Show Marriage Information](#)

15. Holding Out

This page collects the information about the possible holding out relationship(s) of the person. It also collects the decision about a holding out relationship. The information collected on the Holding Out page is shared data among all claims where that person's SSN is active.

Develop possible holding out relationship(s) as of, or any time since xx/xx/xxxx is Yes

Modal Window:

Develop Holding Out Relationship

Holding Out Relationship

* Indicates required information

*** Name**

* First Middle * Last Suffix

*** Does NICHOLAS COLLINS present to the community as being part of a married couple**

Yes No Unknown

Development needed [More Info](#)

*** Consider as a couple for SSI**

Yes No

Other person's SSN

More Info link:

Develop Holding Out ✕

For more information refer to

- [POMS SI 00501.152 Determining Whether Two Individuals Are Holding Themselves Out as a Married Couple](#)
- [POMS SI 00501.150 Determining Whether a Marital Relationship Exists](#)

Development needed ✕

For more information refer to

- [POMS SI 00501.152 Determining Whether Two Individuals Are Holding Themselves Out as a Married Couple](#)
- [POMS SI 00501.150 Determining Whether a Marital Relationship Exists](#)

16. Sponsor

This page collects preliminary information about the claimant's individual sponsors and their spouses. This information is used to determine the sponsors, co-sponsor spouses, and sponsor's spouses that exist on the claimant's record.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Sponsor

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- Person Information
- SSI Application
- Disability
- Multiple SSNs
- Alien Status
- Residency & Presence in the U.S.
- Payment Method
- Financial Permission
- Personal Information Authorization
- Felony Warrant
- Marriage (0)
- Holding Out (0)
- Sponsor**
- Edits and Alerts

* Indicates required information

* **Sponsor**
At least one row is required
When only the claimant or both members of an eligible couple are sponsored by a particular sponsor or sponsoring couple, add that sponsor to the claimant's Sponsor table.
When only the claimant spouse is sponsored by a particular sponsor or sponsoring couple, add that sponsor to the claimant spouse's Sponsor table.

Status	Sponsor Name	Sponsor SSN	Sponsor Relationship to Claimant	Sponsor Spouse Name	Sponsor Spouse SSN	Sponsor Spouse Relationship to Claimant	Co-Sponsor	Actions
•			Other					Select Delete
•			Other			Other	No	Select Delete

Add Sponsor

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

Undo Changes

Next Previous Save & Exit

Modal Window:

Add Sponsor

Sponsor

* Indicates required information

Sponsor name

*** Sponsor SSN**

*** Sponsor's relationship to this claimant**

OK Cancel

C. Living Arrangements

1. Residence Address and Jurisdiction

The Residence Address and Jurisdiction page collects the claimant's physical residence address and jurisdictional address when it is different from the physical residence address. In addition, it is used to record additional residence related data to determine the claimant's federal living arrangement. It is the first living arrangement data collection page in the SSI application for deferred, full, and abbreviated claims.

SSI Claims

Go To | General Identification | **Living Arrangements** | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Residence Address and Jurisdiction

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Period Effective Dates: 05/01/2021 - Continuing

Living Arrangements

- 05/01/2021 - Continuing
- Residence Address and Jurisdiction**

Residence Address

Indicates required information
Select from favorites or type contact information
[Show favorites](#)

Country
United States or U.S. Territory

Street 1 | Street 2 | Street 3 | Street 4

City/Town | State/Territory | ZIP Code

County

Unknown

Jurisdictional residence address same as above
 Yes No Unknown

Override state and county code

State and county code

Residence type

<input checked="" type="radio"/> House, apartment, mobile home, houseboat
<input type="radio"/> Institution
<input type="radio"/> Non-institutional care (placed by an agency in foster care, adult foster care, or family care, and not a resident of an institution)
<input type="radio"/> Room in commercial establishment
<input type="radio"/> Room in private dwelling (separate household from landlord, either room rental only or flat fee for room and board)
<input type="radio"/> Unknown

Lives with
--

Residence start date
mm/dd/yyyy Unknown

Expect change in living arrangement and/or residence
 Yes No Unknown

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

Dropdown list:

Country

- United States or U.S. Territory ^
- Afghanistan
- Albania
- Alderney
- Algeria
- Andaman Islands
- Andorra
- Angola
- Anguilla
- Annobon Island
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ascension
- Ascension Island
- Australia
- Austria
- Azerbaijan
- Azores
- Bahamas
- Bahrain
- Balearic Islands
- Bangladesh
- Barbados
- Barbuda
- Basse Terre
- Belarus v
- Belau

State/Territory

--

Alabama

Alaska

American Samoa

Arizona

Arkansas

California

Colorado

Connecticut

Delaware

District of Columbia

Federated States of Micronesia

Florida

Georgia

Guam

Hawaii

Idaho

Illinois

Indiana

Iowa

Kansas

Kentucky

Louisiana

Maine

Marshall Islands

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

Lives with

--

Alone

Spouse, parents and/or children

Others

Unknown

2. Institution Residence

The purpose is to record residence data collected when the claimant is residing in an institution.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Institution Residence

Name	Social Security Number (SSN)	Role
		Claimant

Period Effective Dates: 09/01/2019 - Continuing

Living Arrangements

- 09/01/2019 - Continuing
- Residence Address and Jurisdiction
- Institution Residence**

Institution name

 Unknown

Address

Country
United States or U.S. Territory

Street 1 **Street 2** **Street 3** **Street 4**

City/Town **State/Territory** **ZIP Code**

 Unknown

Phone

U.S. International

10-digit Number

Date institutionalization began 09/01/2019

Institution for Supplemental Nutrition Assistance Program (SNAP) purposes

Yes No

Admission date 09/01/2019 **Admission date verified**

Yes No

Discharged from the institution

Institution type

Public Private Unknown

Confinement reason

--

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

Confinement reason

Education or vocational training
Medical or psychiatric care
Public Emergency Shelter for the Homeless (PESH)
Publicly Operated Community Residence (POCR)
Prisoner
Other
Unknown

3. California Optional Supplement

The California Optional Supplement page collects the claimant's responses to questions required of all SSI applicants in the state of California. It also records the Claim Representative's determination of the appropriate State Supplementation code.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

California Optional Supplement

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Period Effective Dates: 09/01/2019 - Continuing

Living Arrangements

- 09/01/2019 - Continuing
- Residence Address and Jurisdiction
- Institution Residence
- California Optional Supplement

Indicates required information

Federal living arrangement **Not determined**

Residence state and county code

Needs assistance in personal care, hygiene, or upkeep of residence
For example, help with eating, dressing, bathing, taking medication, caring for room, moving about

Yes No Unknown

Has adequate cooking and food storage facilities

Yes No Unknown

Show person remarks
No remarks

Show file documentation notes
No notes

D. Resources

1. Resource Selection

The Resource Selection page collects and displays information about the resources owned by the claimant or deemor (claimant, claimant spouse, ineligible spouse, parent, sponsor, sponsor spouse, and co-sponsor spouse associated with the claim). This page collects the claimant's or deemor's allegation of ownership for each resource type and is used to trigger the first source of a resource type into the SSI Claim path. When a source of a particular resource type already exists in the SSI Claim path, this page displays information about the existing sources. This page provides an option for the user to add another source of an existing resource type. During preeffectuation reviews or redeterminations, the page provides a way for the user to indicate which of the existing resources will be presented as he walks the path.

Resource Selection

Name	Social Security Number (SSN)	Role
		Claimant

- Resources
- Resource Selection

*** Indicates required information**

Resources
 Since the first moment of 04/01/2021, do you own or does your name appear, either alone or with other people, on any of the following?

*** Trusts**
 Yes No Unknown

*** Vehicles**
 Auto, truck, camper, boat, motorcycle, etc.
 Yes No Unknown

*** Real Property Other than Home**
 Land, houses, buildings, property in foreign countries
 Yes No Unknown

*** Business Equipment**
 Yes No Unknown

*** Achieving a Better Life Experience (ABLE) Account**
 Yes No Unknown

*** Financial Institution Accounts**
 Checking, Savings, Credit Union, Holiday Club, Time Deposits, Individual Indian Money Account, Direct Express, etc.
 Yes No Unknown

*** Cash**
 Yes No Unknown

*** Stocks, Bonds, or Mutual Funds**
 Yes No Unknown

*** Promissory Note, Loan, or Property Agreement**
 Yes No Unknown

*** Items Held for Potential Value or Investment**
 Coin or card collections, jewelry in safe deposit box, etc.
 Yes No Unknown

*** Life Insurance**
 Yes No Unknown

*** Burial Funds**
 Contracts and trusts
 Yes No Unknown

*** Burial Spaces and Related Items**
 Cemetery lots, crypts, caskets, urns, headstones, markers, etc.
 Yes No Unknown

*** Other Resources**
 Life estates, unprobated estates, retirement funds, mineral rights, other items that can be turned into cash
 Yes No Unknown

Transfers

*** Since 04/01/2018 has John Doe or a co-owner sold, transferred title, disposed of any money or other property, including property or money in foreign countries?**
 Yes No Unknown

[Clear Page](#)

2. Trust

The Trust page collects information about trusts for Supplemental Security Income (SSI) claimants and deemors. The page collects information about any trusts (excluding burial trusts) which the claimant or deemors own or whose name appears on the title. It also records assets contained within the trust and a description of those assets. The value section of the page records the combined value of the assets contained within the trust including the total loan amounts against those assets. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Trust
Record information about assets contained in the trust on this page and not on any other resource page.

Name	Social Security Number (SSN)	Role
		Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

* Indicates required information

*** Title of trust**
Planned Lifetime Assistance Network of California (PLAN) Master Pooled Trust. Jane Doe Special Needs Trust etc (500 characters maximum)

Characters remaining: 500

*** Funding type**
--

*** Revocability**
--

*** Established date**

mm/dd/yyyy

*** Trustee type**
--

*** Income from additions or earnings**
 Yes No Unknown

*** Disbursements from trust**
 Yes No Unknown

Earns interest

Set aside for burial

Values (of all resources in this Trust)
Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

Ninety day amendment period applies

Assets contained in trust

Asset Type	Details	Actions
No records found.		

Resource disposal agreement

Show person remarks
No remarks

Show file documentation notes
No notes

Dropdown list:

Funding type

—
Self-funded
Third party funded
Unknown

Revocability

—
Irrevocable
Revocable
Unknown

Trustee type

—
Organization
Person
Unknown

3. Vehicle

The Vehicle page collects information about any vehicles (e.g., cars, trucks, boats, motorcycles, etc.) which the claimant or deemor's own or whose name appears on the title. It also records a description of the vehicle, the market value, the amount owed on a loan for which this vehicle is security and the use of the vehicle. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

NOTE: Due to a regulations change effective March 9, 2005, two USE fields (04/01/2005 OR LATER and BEFORE 04/01/2005) were added to accommodate the proper documentation of the use of the vehicle during each of those time-periods.

SSI Claims

Go To: General Identification Living Arrangements **Resources** Income Benefit Leads Summary Claim Edits and Alerts

Vehicle

Name Social Security Number (SSN) Role Claimant

Resources

- Resource Selection
- Trusts
- Vehicles**
 - Real Property
 - Business Equipment
 - ABLE Accounts
 - Financial Accounts
 - Cash
 - Stocks and Bonds
 - Notes and Loans
 - Value or Investment Items
 - Life Insurance
 - Burial Spaces
 - Other
 - Transfers

*** Indicates required information**

*** Type**

*** Year**
 Unknown

*** Make**
 Unknown

*** Model**
 Unknown

*** Co-Owned**
 Yes No Unknown

Use before 04/01/2005

Use 04/01/2005 or later

Values
 Alleged Value or Verified Value is required [N.A.D.A. e-Valuator™](#)

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="checkbox"/>	<input type="text" value=""/>	Delete

Resource disposal agreement

▼ Show person remarks
 No remarks

▼ Show file documentation notes
 No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list:

Type

--
Auto
Boat
Camper
Motorcycle
Truck
Other
Unknown

Use before 04/01/2005

--
Employment
Essential Daily Activities
Medical Treatment
Specifically Equipped for Handicapped
Other
Unknown

Use 04/01/2005 or later

--
Transportation
Other
Unknown

4. Real Property

The Real Property page is used to collect the identifying information for any real property that is owned by the claimant, eligible spouse and/or deemors. In addition to the identifying information, this data group collects the value of the resource. For example: land, houses, buildings, and property in foreign countries.

SSI Claims
Go To ▾
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Real Property

Name	Social Security Number (SSN)	Role Claimant																		
<div style="display: flex;"> <div style="width: 25%; border: 1px solid #ccc; padding: 5px;"> <p>Resources</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Resource Selection <input checked="" type="checkbox"/> Trusts <input checked="" type="checkbox"/> Vehicles <input checked="" type="radio"/> Real Property <input type="radio"/> Business Equipment <input type="radio"/> ABLE Accounts <input type="radio"/> Financial Accounts <input type="radio"/> Cash <input type="radio"/> Stocks and Bonds <input type="radio"/> Notes and Loans <input type="radio"/> Value or Investment Items <input type="radio"/> Life Insurance <input type="radio"/> Burial Spaces <input type="radio"/> Other <input type="radio"/> Transfers </div> <div style="width: 75%; padding-left: 10px;"> <p>Indicates required information</p> <p>Description <input style="width: 100%;" type="text"/></p> <p>Address</p> <p>Country: <input style="width: 100%;" type="text" value="United States or U.S. Territory"/></p> <p>Street 1: <input style="width: 20%;" type="text"/> Street 2: <input style="width: 20%;" type="text"/> Street 3: <input style="width: 20%;" type="text"/> Street 4: <input style="width: 20%;" type="text"/></p> <p>City/Town: <input style="width: 20%;" type="text"/> State/Territory: <input style="width: 20%;" type="text" value="--"/> ZIP Code: <input style="width: 20%;" type="text"/></p> <p><input type="checkbox"/> Unknown</p> <p>Used to produce income <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <p>Nonbusiness property used for self-support <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <p>Co-Owned <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <p>Values Alleged Value or Verified Value is required</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th>* Date From (mm/yyyy)</th> <th>* Date To (mm/yyyy)</th> <th>Alleged Value (\$)</th> <th>Verified Value (\$)</th> <th>Loan Amount (\$)</th> <th>Excluded Amount (\$)</th> <th>Unknown</th> <th>Countable Amount (\$)</th> <th>Actions</th> </tr> </thead> <tbody> <tr> <td><input style="width: 20%;" type="text"/></td> <td><input style="width: 20%;" type="text"/></td> <td><input style="width: 20%;" type="text"/></td> <td><input style="width: 20%;" type="text"/></td> <td><input style="width: 20%;" type="text"/></td> <td><input style="width: 20%;" type="text"/></td> <td><input type="checkbox"/></td> <td><input style="width: 20%;" type="text"/></td> <td style="text-align: center;">Delete</td> </tr> </tbody> </table> <p><input type="checkbox"/> Resource disposal agreement</p> <p>Show person remarks No remarks</p> <p>Show file documentation notes No notes</p> <p style="text-align: right;"> <input type="button" value="Add Another"/> <input type="button" value="Clear Page"/> <input type="button" value="Delete"/> </p> </div> </div>			* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input type="checkbox"/>	<input style="width: 20%;" type="text"/>	Delete
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions												
<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input style="width: 20%;" type="text"/>	<input type="checkbox"/>	<input style="width: 20%;" type="text"/>	Delete												

Dropdown list:

Country – United States or U.S. Territory (Default)

United States or U.S. Territory
Afghanistan
Albania
Algeria
Andorra
Angola
Anguilla
Antarctica
Antigua
Antigua and Barbuda
Argentina
Armenia
Aruba
Ashmore and Cartier Islands
Australia
Austria
Azerbaijan
Bahamas, the
Bahrain
Baker Island
Bangladesh
Barbados
Bassas da India
Basutoland
Belarus
Belgium
Belize
Benin
Benin
Benin West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

5. Business Equipment

The Business Equipment page is used to collect business equipment information, values and whether or not the equipment is co-owned for resources. This information is used in conjunction with other resource pages to determine the claimant's countable resources.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Business Equipment

Name	Social Security Number (SSN)	Role	Claimant																		
<div style="display: flex;"> <div style="width: 25%; border: 1px solid #ccc; padding: 5px;"> <p>Resources</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Resource Selection <input checked="" type="checkbox"/> Trusts <input checked="" type="checkbox"/> Vehicles <input checked="" type="checkbox"/> Real Property <input type="checkbox"/> Business Equipment <input type="checkbox"/> ABLE Accounts <input type="checkbox"/> Financial Accounts <input type="checkbox"/> Cash <input type="checkbox"/> Stocks and Bonds <input type="checkbox"/> Notes and Loans <input type="checkbox"/> Value or Investment Items <input type="checkbox"/> Life Insurance <input type="checkbox"/> Burial Spaces <input type="checkbox"/> Other <input type="checkbox"/> Transfers </div> <div style="width: 75%; padding-left: 10px;"> <p>* Indicates required information</p> <p>* Description</p> <input style="width: 100%;" type="text"/> <p>* Co-Owned</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown </p> <p>Values</p> <p>Alleged Value or Verified Value is required</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 10%;">Date From (mm/yyyy)</th> <th style="width: 10%;">Date To (mm/yyyy)</th> <th style="width: 10%;">Alleged Value (\$)</th> <th style="width: 10%;">Verified Value (\$)</th> <th style="width: 10%;">Loan Amount (\$)</th> <th style="width: 10%;">Excluded Amount (\$)</th> <th style="width: 10%;">Unknown</th> <th style="width: 10%;">Countable Amount (\$)</th> <th style="width: 10%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="checkbox"/></td> <td></td> <td style="text-align: right;">Delete</td> </tr> </tbody> </table> <p><input type="checkbox"/> Resource disposal agreement</p> <p>v Show person remarks No remarks</p> <p>v Show file documentation notes No notes</p> <p style="text-align: right;"> <input type="button" value="Add Another"/> <input type="button" value="Clear Page"/> <input type="button" value="Delete"/> </p> </div> </div>				Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		Delete
Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions													
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		Delete													

6. Achieving a Better Life Experience (ABLE) Account

The Achieving a Better Life Experience (ABLE) Account page (hereafter referred to as the ABLE page) exists in the SSI Claims System for all claimants and deemors when an Achieving a Better Life Experience (ABLE) account has been reported to the Field Office.

Upon receipt of a state agency report, SSA's systems employ a series of rules to match and update each account received to an existing ABLE account.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Achieving a Better Life Experience (ABLE) Account

Name: Social Security Number (SSN): Role: Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

Indicates required information

*** Program state**
 Unknown

*** Account number**
 Unknown

*** Account opened date**
 Unknown
mm/dd/yyyy

Account closed date

mm/dd/yyyy

Signature authority name
First Middle Last Suffix

Values
Alleged Value or Verified Value is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[More Info](#)

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) | [Previous](#) | [Save & Exit](#)

More Info:

Excluded Amount: More Information ✕

The Excluded Amount is automatically calculated up to the current ABLE exclusion limit. Refer to [SI 01130.740](#)

[Close](#)

Dropdown list:

Program state

—

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada

7.

7. Financial Institution Account

The Financial Institution Accounts pages exists in SSI Claims Systems, which records information about the financial institution accounts of Supplemental Security Income (SSI) claimants and deemors. The information collected includes: the type of financial institution account, the account number, the name and address of the financial institution, the value of the account for particular periods, and whether the account is co-owned, earns interest and/or is set aside for burial.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Financial Institution Account

Name Social Security Number (SSN) Role Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts**
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

Financial Institution Information

Indicates required information

Use Search Financial Institutions or Select from Favorites to add or change the Financial Institution

Name --

Address --

OR

Account Information

Account type

Account number

Dedicated account

Collective account or master sub-account

Account title (500 characters maximum)

Characters remaining: 500

Co-Owned

Yes No Unknown

Earns interest

Set aside for burial

Values

Alleged Value or Verified Value is required [Consider Early-Deposited Benefits \(EDB\) Exclusion](#)

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

Show person remarks
No remarks

Show file documentation notes
No notes

Dropdown list:

Account type

Checking
Credit union
Direct Express
Holiday club
Individual Indian monies
Savings
Time deposit
Other
Unknown

Modal Window:

Search Financial Institutions

Search Financial Institutions		
Routing number		
<input type="text"/>		
Financial Institution Name ?		
<input type="text"/>		
Street		
<input type="text"/>		
<input type="text"/>		
City	State	ZIP Code
<input type="text"/>	-- <input type="button" value="v"/>	<input type="text"/>

<input type="button" value="Search"/>	<input type="button" value="Cancel"/>
---------------------------------------	---------------------------------------

Select from Favorites

Favorite Financial Institutions	
Total:	
Financial Institution	Actions
	<input type="button" value="Select"/> <input type="button" value="Delete"/>
	<input type="button" value="Select"/> <input type="button" value="Delete"/>

<input type="button" value="Close Favorites"/>
--

More Info link:

Consider Early-Deposited Benefits (EDB) Exclusion

Early- Deposited Benefits: More Information ✕ ^

We issue SSI payments prior to the first day of the month for which they are due a few times each year. The Treasury Department dates and issues recurring SSI payments and Federally administered supplementary payments on the last banking day of the prior month whenever the first day of the month falls on a Saturday, Sunday, or Federal holiday. These payments are called early-deposited benefits (EDB).

Early deposits before the month the payments are normally received can occur with many types of recurring income. States administering their own supplementary payments may also make their payments early, i.e., in the month before the payments are ordinarily made. Other regularly received payments, (e.g., Social Security benefits, wages, veterans benefits, pension or annuity) may sometimes be early.

Incorrect SSI eligibility determinations may result when early payments are included in the first of the month resource balance for the month the income normally would have been received. To prevent incorrect determinations, we must deduct early payment amounts from the countable resources in the month the income is normally received.

For early deposits of SSI, exclude the EDB amount when the month is an EDB month listed in [SM 01315.005](#) and applying the exclusion would

mean the difference between SSI eligibility and ineligibility (i.e., the countable amount exceeds the resource limit by an amount up to the EDB amount). Complete the Excluded amount field and select an Exclusion reason of "Early RSDI or SSI payment".

Similarly exclude early payments of other recurring income from countable resources in the months in which the payments are ordinarily received. Complete the Excluded amount field, select an Exclusion reason of "Other", complete "Other reason", explain the excluded amount, and document the evidence of early receipt in the File documentation notes.

NOTE: Be alert to situations in which multiple exclusions may apply simultaneously to the first of the month balance. Apply all applicable exclusions and document the file following the relevant policies and procedures.

[Close](#)

8. Cash

The Cash page exists in the SSI Claims system application to record information about cash in the possession of Supplemental Security Income (SSI) claimant or deemor. The information collected includes: periods of possession, amounts, exclusion reason(s), and if it is set aside for burial. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To [General Identification](#) [Living Arrangements](#) [Resources](#) [Income](#) [Benefit Leads](#) [Summary](#) [Claim Edits and Alerts](#)

Cash

Document cash values as of the first moment of the month.

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash**
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

Set aside for burial

Values

[Consider Early-Deposited Benefits \(EDB\) Exclusion](#) [Currency Converter](#)

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

More Info link:

Consider Early-Deposited Benefits (EDB) Exclusion

Early- Deposited Benefits: More Information ✕ ^

We issue SSI payments prior to the first day of the month for which they are due a few times each year. The Treasury Department dates and issues recurring SSI payments and Federally administered supplementary payments on the last banking day of the prior month whenever the first day of the month falls on a Saturday, Sunday, or Federal holiday. These payments are called early-deposited benefits (EDB).

Early deposits before the month the payments are normally received can occur with many types of recurring income. States administering their own supplementary payments may also make their payments early, i.e., in the month before the payments are ordinarily made. Other regularly received payments, (e.g., Social Security benefits, wages, veterans benefits, pension or annuity) may sometimes be early.

Incorrect SSI eligibility determinations may result when early payments are included in the first of the month resource balance for the month the income normally would have been received. To prevent incorrect determinations, we must deduct early payment amounts from the countable resources in the month the income is normally received.

For early deposits of SSI, exclude the EDB amount when the month is an EDB month listed in [SM 01315.005](#) and applying the exclusion would

mean the difference between SSI eligibility and ineligibility (i.e., the countable amount exceeds the resource limit by an amount up to the EDB amount). Complete the Excluded amount field and select an Exclusion reason of "Early RSDI or SSI payment".

Similarly exclude early payments of other recurring income from countable resources in the months in which the payments are ordinarily received. Complete the Excluded amount field, select an Exclusion reason of "Other", complete "Other reason", explain the excluded amount, and document the evidence of early receipt in the File documentation notes.

NOTE: Be alert to situations in which multiple exclusions may apply simultaneously to the first of the month balance. Apply all applicable exclusions and document the file following the relevant policies and procedures.

[Close](#)

9. Stock, Bond, or Mutual Fund

The Stock, Bond, or Mutual Bond page collects information about a stock, bond, or mutual fund of a Supplemental Security Income (SSI) claimant or deemor. The information collected includes the type of stock, bond or mutual fund, description, the issuance date for a bond, whether it earns interest or dividends, the value for particular periods, whether it is co-owned, and/or whether the stock, bond, or mutual fund is set aside for burial. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Stock, Bond, or Mutual Fund

Use a separate page to record each item.

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds**
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

Indicates required information

Type

Description

Co-Owned

Yes No Unknown

Set aside for burial

Values

Alleged Value or Verified Value is required [Savings Bond Calculator](#)

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
					<input type="checkbox"/>		Delete

Show person remarks

No remarks

Show file documentation notes

No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list:

Type

- Mutual fund
- Stock
- U.S. Savings Bond (Series E and EE)
- U.S. Savings Bond (Series H and HH)
- U.S. Savings Bond (Series I)
- Other bond
- Unknown

10. Promissory Note, Loan, or Property Agreement

The Promissory Note, Loan or Property Agreement page exists in the SSI Claims System application, which allows the user to collect information about any promissory note, loan or property agreement which a claimant or deemor owns, or whose name appears on the title. It also records information about the borrower, the date and amount of the original loan, current market value, the outstanding principal balance, and the plan for repayment. This information is used in conjunction with other resource pages, to determine the claimant's countable resources.

Dropdown list:

Type

- Oral/informal loan
- Promissory note/commercial loan
- Property agreement
- Written/informal loan
- Unknown

Address – Country

- United States or U.S. Territory
- Afghanistan
- Albania
- Alderney
- Algeria
- Andorra
- Angola
- Anguilla
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ascension
- Australia
- Austria
- Azerbaijan
- Azores
- Bahamas
- Bahrain
- Bangladesh
- Barbados
- Barbuda
- Belarus
- Belgium
- Belize
- Benin
- Bermuda
- Bhutan
- Bolivia

11. Item Held for Potential Value or Investment

The Item Held for Potential Value or Investment page is used to collect items of value such as collectibles, race or breeding horses, jewelry not worn or held for family significance, etc. These items can be owned by the claimant, eligible spouse and/or deemors. This information is used in conjunction with other resource pages to determine the claimant's countable resources.

SSI Claims
Go To ▾
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Item Held for Potential Value or Investment

Do not document items that meet our definition of household goods and personal effects.

Name	Social Security Number (SSN)	Role Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
 - Life Insurance
 - Burial Spaces
 - Other
 - Transfers

* Indicates required information

Description
For example: collectibles, race or breeding horses, jewelry not worn or held for family significance, etc.

Co-Owned
 Yes No Unknown

Values
Alleged Value or Verified Value is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

Resource disposal agreement

Show person remarks
No remarks

Show file documentation notes
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

12. Life Insurance

The Life Insurance page exists in the SSI Claims system, which records information about the life insurance policies of Supplemental Security Income (SSI) claimants and deemors. The information collected includes: the type of policy, name of insured, face value, cash surrender value, loan amount, excluded amounts, insurance company name and address, if the policy pays dividends, whether the policy is co-owned, and/or is set aside for burial. This information is used in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Life Insurance

Name	Social Security Number (SSN)	Role
		Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance**
- Burial Spaces
- Other
- Transfers

Company Unknown

Address

Country:

Street 1: Street 2: Street 3: Street 4:

City/Town: State/Territory: ZIP Code:

Policy number **Date purchased**

Name of insured

Face value \$ Unknown

Policy has a Cash Surrender Value (CSV)

Yes No Unknown

Set aside for burial

Dividend accumulations

Yes No Unknown

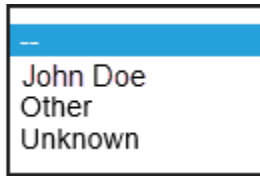
Resource disposal agreement

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

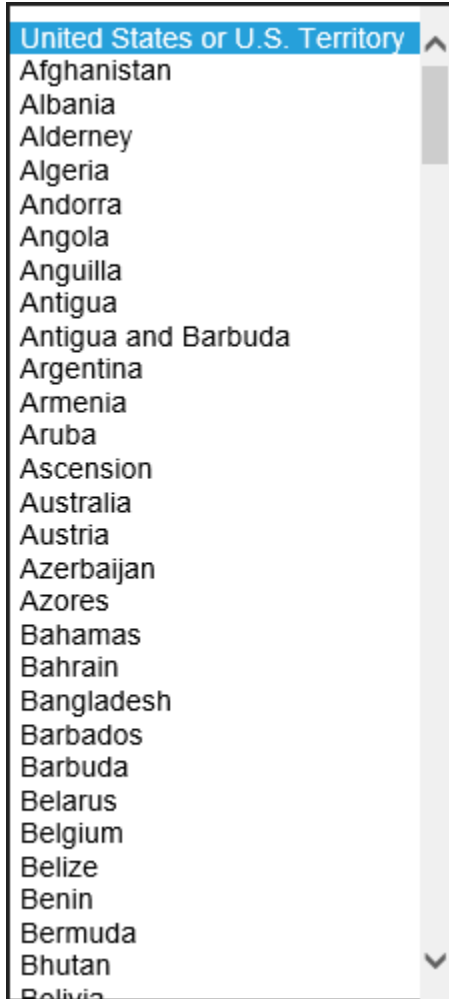
Dropdown list:

Name of insured



A dropdown menu with a blue header containing "--". The list items are "John Doe", "Other", and "Unknown".

Address - Country



A dropdown menu with a blue header containing "United States or U.S. Territory". The list items include: Afghanistan, Albania, Alderney, Algeria, Andorra, Angola, Anguilla, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ascension, Australia, Austria, Azerbaijan, Azores, Bahamas, Bahrain, Bangladesh, Barbados, Barbuda, Belarus, Belgium, Belize, Benin, Bermuda, and Bhutan. The list is scrollable and has a grey scrollbar on the right side.

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

13. Burial Fund

The Burial Fund page exists in the SSI Claims System, and allows the user to collect information about burial contracts and trusts that the claimant owns. It also records who the contract or trust is for, the date it was set aside, the original amount set aside, whether it is co-owned, revocable, irrevocable or partially irrevocable, earns interest, as well as the purchase price or market value. This information is used in conjunction with other resource pages to determine the claimant's countable resources.

SSI Claims Val - Version: 1.9.5.23, Group: 2 Robin Madison

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Burial Fund

Name: GIANNA LYNN BUSH Social Security Number (SSN): 051-42-9708 Role: Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value or Investment Items
- Life Insurance
- Burial Funds**
- Burial Spaces
- Other
- Transfers

* Indicates required information

Type

Description

Name for whom held
 *First Middle *Last Suffix Unknown

Meets exclusion relationship
For children: self or parent. For adults: self or spouse.
 Yes No Decide later

Date asset set aside
 Unknown

Original amount set aside
 \$ Earns interest

Co-Owned
 Yes No Unknown

Values
Alleged Value or Verified Value is required

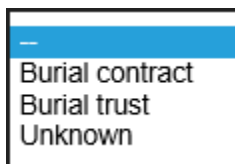
Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Revocable Amount (\$)	Verified Revocable Amount (\$)	Alleged Irrevocable Amount (\$)	Verified Irrevocable Amount (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Resource disposal agreement

Show person remarks
No remarks

Show file documentation notes
No notes

Dropdown list:



14. Burial Space or Related Item

The Burial Space or Related Item page is used to collect information about the location and value of burial spaces and related items (cemetery lots, crypts, caskets, vaults, urns, and mausoleums, other repositories for burial, headstones or markers) which the claimant owns or whose name appears on the title. This information is used, in conjunction with other resource pages, to determine the claimant's countable resources.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Burial Space or Related Item

Name	Social Security Number (SSN)	Role
		Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value of Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

Indicates required information

Type

Relationship of person for whom held

Name for whom held

First Middle Last Suffix Unknown

Co-Owned
 Yes No Unknown

Values
 Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

Resource disposal agreement

Show person remarks
 No remarks

Show file documentation notes
 No notes

[Add Another](#) [Clear Page](#) [Delete](#)

Next | Previous | Save & Exit

Dropdown list:

Type

—

Casket

Cemetery lot

Crypt

Headstone

Marker

Urn

Other

Unknown

Relationship of person for whom held

- Self
- Spouse
- Parent
- Parent's Spouse
- Child
- Child's spouse
- Sibling
- Sibling's spouse
- Other
- Unknown

15. Other Resource

The Other Resource page collects information about other resources, which are not listed separately on the Resources Selection menu for a Supplemental Security Income (SSI) claimant or deemor. The information collected includes the type of resource, a description, its value for particular periods, and whether or not the resource is co-owned and/or is set aside for burial. This information is used, in conjunction with other resource screens, to determine the claimant's countable resources.

SSI Claims

Go To: General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Other Resource

Name Social Security Number (SSN) Role Claimant

Resources

- Resource Selection
- Trusts
- Vehicles
- Real Property
- Business Equipment
- ABLE Accounts
- Financial Accounts
- Cash
- Stocks and Bonds
- Notes and Loans
- Value of Investment Items
- Life Insurance
- Burial Spaces
- Other
- Transfers

Indicates required information

Type

Description

Co-Owned

Yes No Unknown

Earns interest

Values

Alleged Value or Verified Value is required

Date From (mm/yyyy)	Date To (mm/yyyy)	Alleged Value (\$)	Verified Value (\$)	Loan Amount (\$)	Excluded Amount (\$)	Unknown	Countable Amount (\$)	Actions
						<input type="checkbox"/>		Delete

Resource disposal agreement

Show person remarks
No remarks

Show file documentation notes
No notes

Add Another Clear Page Delete

Next Previous Save & Exit

Dropdown list:

Type

ABLE prepaid debit card

Life estate other than residence

Life insurance dividend accumulations

Mineral rights

Prepaid debit card

Retirement/pension fund

Unprobated estate other than residence

Other

Unknown

16. Property / Cash Given or Sold

The Property / Cash Given or Sold page is used to collect whether the claimant or claimant's eligible spouse disposed of any resources in the 36 months prior to the effective filing month or in the post-entitlement period of review. This data group serves two purposes. The first purpose is to collect information regarding the validity of an alleged transfer of resource ownership for SSI resource determinations. The second purpose of this data group is to collect information about resources that have been given away or sold at less than fair market value for State Medicaid agency notification.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Property / Cash Given or Sold

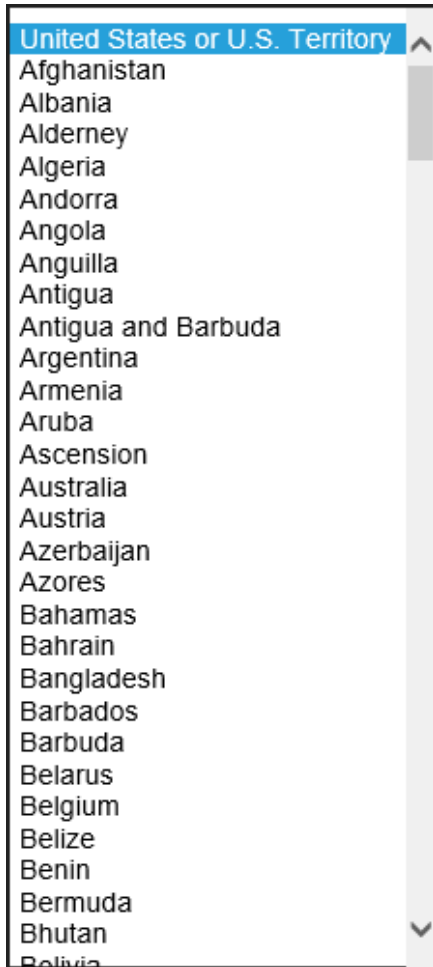
Name	Social Security Number (SSN)	Role Claimant
<div style="display: flex;"> <div style="width: 25%; border: 1px solid #ccc; padding: 5px;"> <p>Resources</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Resource Selection <input checked="" type="checkbox"/> Trusts <input checked="" type="checkbox"/> Vehicles <input checked="" type="checkbox"/> Real Property <input checked="" type="checkbox"/> Business Equipment <input checked="" type="checkbox"/> ABLE Accounts <input checked="" type="checkbox"/> Financial Accounts <input checked="" type="checkbox"/> Cash <input checked="" type="checkbox"/> Stocks and Bonds <input checked="" type="checkbox"/> Notes and Loans <input checked="" type="checkbox"/> Value or Investment Items <input checked="" type="checkbox"/> Life Insurance <input checked="" type="checkbox"/> Burial Spaces <input checked="" type="checkbox"/> Other <input type="checkbox"/> Transfers </div> <div style="width: 75%; padding: 5px;"> <p><small>* Indicates required information</small></p> <p>* Description <input style="width: 100%;" type="text"/></p> <hr/> <p>* Still own part of property <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <hr/> <p>* Market value or amount of cash gift <small>Record the market value of the portion of the property that the individual transferred</small> <input style="width: 200px;" type="text"/> <input type="checkbox"/> Unknown</p> <hr/> <p>* Receiver's name <input style="width: 150px;" type="text"/> <input type="checkbox"/> Unknown</p> <hr/> <p>Receiver's address <small>Country</small> <input type="text" value="United States or U.S. Territory"/></p> <p>Street 1 <input style="width: 80px;" type="text"/> Street 2 <input style="width: 80px;" type="text"/> Street 3 <input style="width: 80px;" type="text"/> Street 4 <input style="width: 80px;" type="text"/></p> <p>City/Town <input style="width: 80px;" type="text"/> State/Territory <input style="width: 80px;" type="text"/> ZIP Code <input style="width: 80px;" type="text"/></p> <hr/> <p>* Receiver relationship <input type="text" value="--"/></p> <hr/> <p>* Transfer date <input style="width: 80px;" type="text"/> <input type="checkbox"/> Unknown <small>mm/dd/yyyy</small></p> <hr/> <p>* Method of transfer <input type="text" value="--"/></p> <hr/> <p>* Additional considerations or proceeds expected <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p> <hr/> <p>Show person remarks No remarks</p> <p>Show file documentation notes No notes</p> </div> </div>		

Add Another
Clear Page
Delete

Next
Previous
Save & Exit

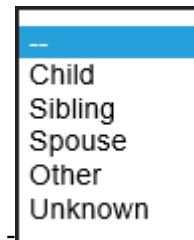
Dropdown list:

Receiver's address – Country



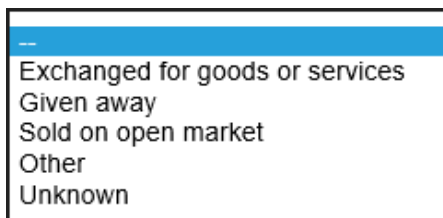
A dropdown menu showing a list of countries and territories. The top item, "United States or U.S. Territory", is highlighted in blue. The list includes: United States or U.S. Territory, Afghanistan, Albania, Alderney, Algeria, Andorra, Angola, Anguilla, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ascension, Australia, Austria, Azerbaijan, Azores, Bahamas, Bahrain, Bangladesh, Barbados, Barbuda, Belarus, Belgium, Belize, Benin, Bermuda, Bhutan, and Bolivia.

Receiver relationship



A dropdown menu showing relationship options. The top item, "--", is highlighted in blue. The list includes: Child, Sibling, Spouse, Other, and Unknown.

Method of transfer



A dropdown menu showing transfer methods. The top item, "--", is highlighted in blue. The list includes: Exchanged for goods or services, Given away, Sold on open market, Other, and Unknown.

E. Income

1. Income Selection

The Income Selection page collects and displays information about the type of income being received by the claimant or deemor. The Income types that are selected trigger the source of income type into the SSI Claim path. When a source of a particular income type already exists in the SSI Claim path, this page displays information about the existing sources.

This page also provides an option for the user to add another source of an existing income type.

Income Selection

Name	Social Security Number (SSN)	Role
		Claimant

Income

- Income Selection
- Office of Child Support Enforcement Data

*** Indicates required information**

Income
 Since the first moment of 01/01/2020, have you received, or do you expect to receive in the next 14 months, income from any of these sources?

*** Temporary Assistance for Needy Families**
 Yes No Unknown

*** Refugee Cash Assistance**
 Yes No Unknown

*** Bureau of Indian Affairs**
 Yes No Unknown

*** Disaster Assistance**
 Yes No Unknown

*** Adoption, Foster Care, or Kinship Guardianship Assistance**
 Yes No Unknown

*** Other State, Local, or Tribal Assistance**
 Based on need and not based on need
 Yes No Unknown

*** Other Federal Income Based on Need**
 Federally funded private assistance and other Federal assistance
 Yes No Unknown

*** Alimony or Spousal Support**
 Alimony, spousal impoverishment, and other spousal support
 Yes No Unknown

*** Child Support**
 Court ordered or voluntary, parent in or outside of household, arrearages, and TANF pass-through
 Yes No Unknown

*** Wages**
 Includes earned royalties and honoraria
 Yes No Unknown

*** Self-Employment**
 All taxable years covered by the review period. Includes earned royalties and honoraria
 Yes No Unknown

*** Sick Pay (Earned)**
 Received within first full six months after stopping work and not based on employee's contribution
 Yes No Unknown

*** Sick Pay (Unearned)**
 Received within first full six months after stopping work and based on employee's contribution, or received more than first full six months after stopping work
 Yes No Unknown

*** Workers' Compensation**
 Yes No Unknown

*** Unemployment Compensation**
 Yes No Unknown

*** Social Security**
 Yes No Unknown

*** Black Lung**
 Yes No Unknown

*** Office of Personnel Management**
 Yes No Unknown

*** Railroad Board**
 Yes No Unknown

*** Department of Veterans Affairs**
 Yes No Unknown

*** Pension, Annuity, Retirement, or Disability**
Includes disability insurance, state annuities for certain veterans, and state disability insurance
 Yes No Unknown

*** Interest**
 Yes No Unknown

*** Dividends**
 Yes No Unknown

*** Royalties or Honoraria (Unearned)**
If earned, record on Wages or Self-Employment
 Yes No Unknown

*** Rental or Lease Income**
Includes income from subletting and renting out a room. If received from trade or business (e.g. someone in the business of renting properties), record on Self-Employment
 Yes No Unknown

*** Other Income**
Includes cash, gambling winnings, prizes, gifts, settlements, insurance proceeds, and other income or support not mentioned previously
 Yes No Unknown

Income Related Items

Blind Countable Income

Plan to Achieve Self-Support

[Undo Changes](#)

[Next](#) [Previous](#) [Save & Exit](#)

2. Temporary Assistance for Needy Families

This page collects and/or displays information regarding Temporary Assistance for Needy Families being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Temporary Assistance for Needy Families

Name	Social Security Number (SSN)	Role Claimant

Income

Income Selection

Temporary Assistance for Needy Families

Office of Child Support Enforcement Data

* Indicates required information

Select from favorites or type source information

[Show favorites](#)

Source

Unknown

Address

* Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone

Monthly Values

* Date From (mm/yyyy)	* Date To (mm/yyyy)	* Family Grant Amount (\$)	* Amount Without Individual (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Verified	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)

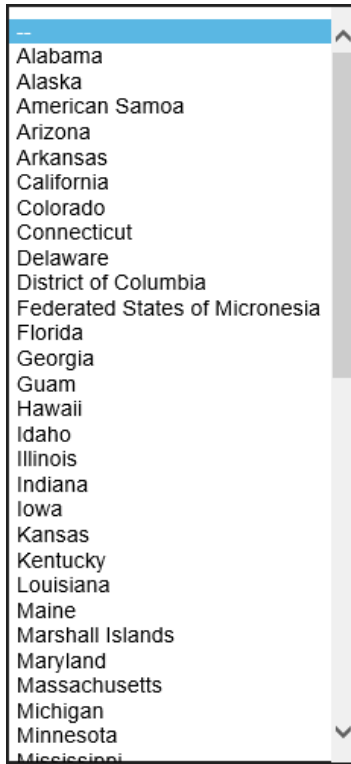
No remarks

[Show file documentation notes](#)

No notes

Dropdown list:

State/Territory

- 
- - Alabama
 - Alaska
 - American Samoa
 - Arizona
 - Arkansas
 - California
 - Colorado
 - Connecticut
 - Delaware
 - District of Columbia
 - Federated States of Micronesia
 - Florida
 - Georgia
 - Guam
 - Hawaii
 - Idaho
 - Illinois
 - Indiana
 - Iowa
 - Kansas
 - Kentucky
 - Louisiana
 - Maine
 - Marshall Islands
 - Maryland
 - Massachusetts
 - Michigan
 - Minnesota
 - Mississippi

3. Refugee Cash Assistance

This page collects and/or displays information regarding the type of refugee cash assistance being alleged or received and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

Refugee Cash Assistance

Name	Social Security Number (SSN)	Role
		Claimant

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance**
- Office of Child Support Enforcement Data

* Indicates required information

* **Type**

--

Select from favorites or type source information

▼ Show favorites

* **Source**

Unknown **ID**

Address

Country

United States or U.S. Territory

* Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

▼ Show person remarks

No remarks

▼ Show file documentation notes

No notes

Dropdown list:

Type

-
- Federally funded - based on need
- State, local, or tribal - based on need
- Other
- Unknown

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Berlin, West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

4. Bureau of Indian Affairs

This page collects and/or displays information regarding the Bureau of Indian Affairs Assistance being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Bureau of Indian Affairs Assistance

Name	Social Security Number (SSN)	Role
		Claimant

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Office of Child Support Enforcement Data

Type

Indicates required information

--

Select from favorites or type source information

Show favorites

Source

Unknown ID

Address

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone

Show person remarks
No remarks

Show file documentation notes
No notes

Dropdown list:

Type

-
- Adult custodial care - non-institutional
- Child welfare assistance - non-institutional
- General assistance
- Unknown

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

5. Disaster Assistance

This page collects and/or displays information regarding the type of Disaster Assistance being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Disaster Assistance

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

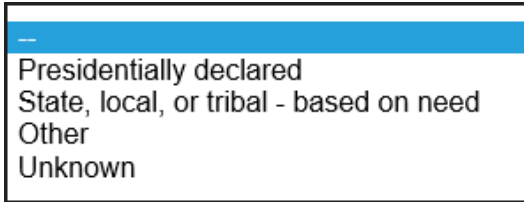
- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance**
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

Form Fields:

- Type:**
- Source:** Unknown
- Address:**
 - Country:
 - Street 1: Street 2: Street 3: Street 4:
 - City/Town: State/Territory: ZIP Code:
 - Unknown
- Contact:**
- Phone:** U.S. International
10-digit Number:
- Remarks:**
- Documentation Notes:**

Dropdown list:

Type



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing the following options: "Presidentially declared", "State, local, or tribal - based on need", "Other", and "Unknown".

State/Territory



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a scrollable list of U.S. states and territories. The visible options are: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. The list is partially obscured at the bottom.

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

6. Adoption, Foster Care, or Kinship Guardianship Assistance

This page collects and/or displays information regarding adoption, foster care, or kinship guardianship assistance being alleged or received, and the amount.

SSI Claims
▼

Go To

✔ General Identification
 ✔ Living Arrangements
 ✔ Resources
 ○ Income
 ✔ Benefit Leads
 ○ Summary
 ○ Claim Edits and Alerts

Adoption, Foster Care, or Kinship Guardianship Assistance

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance**
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

***Income and funding type**

--

Select from favorites or type source information

▼ Show favorites

***Source**

Unknown

Address

Country

United States or U.S. Territory

***Street 1** **Street 2** **Street 3** **Street 4**

City/Town **State/Territory**

--

ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

▼ Show person remarks

No remarks

▼ Show file documentation notes

No notes

Add Another
Clear Page
Delete

Next
Previous
Save & Exit

Dropdown list:

Income and funding type

-
- Adoption assistance: Other
- Adoption assistance: State, local, or tribal - based on need
- Adoption assistance: Title IV-B or title XX
- Adoption assistance: Title IV-E - based on need
- Adoption assistance: Title IV-E - not based on need
- Adoption assistance: Unknown
- Foster care payment: Other
- Foster care payment: Section 477 of title IV-E - independent living initiatives
- Foster care payment: State, local, or tribal - based on need
- Foster care payment: Title IV-B or title XX
- Foster care payment: Title IV-E - based on need
- Foster care payment: Unknown
- Kinship guardianship assistance: Title IV-E - based on need
- Kinship guardianship assistance: Title IV-E - not based on need
- Kinship guardianship assistance: Unknown
- Unknown

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Berlin, West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

7. Other State, Local, or Tribal Assistance

This page collects and/or displays information regarding the type of other state, local, or tribal assistance being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Other State, Local, or Tribal Assistance

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance**
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Select from favorites or type source information

[Show favorites](#)

Source Unknown

Description

Type

--

Address

* Street 1 Street 2 Street 3 Street 4

City/Town State/Territory -- ZIP Code

Unknown

Contact

Phone

Monthly Values

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

Dropdown list:

Type

—
Federally funded private - based on need
Other Federal assistance - based on need
Unknown

State/Territory

—	^
Alabama	
Alaska	
American Samoa	
Arizona	
Arkansas	
California	
Colorado	
Connecticut	
Delaware	
District of Columbia	
Federated States of Micronesia	
Florida	
Georgia	
Guam	
Hawaii	
Idaho	
Illinois	
Indiana	
Iowa	
Kansas	
Kentucky	
Louisiana	
Maine	
Marshall Islands	
Maryland	
Massachusetts	
Michigan	
Minnesota	
Mississippi	v

8. Other Federal Income Based on Need

This page collects and/or displays information regarding the type of Federal Income based on need being alleged or received, and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Other Federal Income Based On Need

Name	Social Security Number (SSN)	Role Claimant																		
<div style="display: flex;"> <div style="width: 25%; border-right: 1px solid #ccc; padding-right: 10px;"> <p>Income</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Income Selection <input checked="" type="checkbox"/> Temporary Assistance for Needy Families <input checked="" type="checkbox"/> Refugee Cash Assistance <input checked="" type="checkbox"/> Bureau of Indian Affairs Assistance <input checked="" type="checkbox"/> Disaster Assistance <input checked="" type="checkbox"/> Adoption, Foster Care, and Kinship Guardianship Assistance <input checked="" type="checkbox"/> Other State, Local, and Tribal Assistance <input checked="" type="checkbox"/> Other Federal Income Based on Need <input type="checkbox"/> Alimony and Spousal Support <input type="checkbox"/> Child Support <input type="checkbox"/> Wages <input type="checkbox"/> Self-Employment Income <input type="checkbox"/> Sick Pay (Earned) <input type="checkbox"/> Sick Pay (Unearned) <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Unemployment Compensation <input type="checkbox"/> Social Security Benefits <input type="checkbox"/> Black Lung Benefits <input type="checkbox"/> Office of Personnel Management Benefits <input type="checkbox"/> Railroad Board Benefits <input type="checkbox"/> Veterans Affairs Payments <input type="checkbox"/> Pensions, Annuities, Retirement, and Disability Payments <input type="checkbox"/> Interest <input type="checkbox"/> Dividends <input type="checkbox"/> Royalties and Honoraria (Unearned) <input type="checkbox"/> Rental and Lease Income <input type="checkbox"/> Other Income <input type="checkbox"/> Blind Countable Income <input type="checkbox"/> Plan to Achieve Self-Support <input type="checkbox"/> School Data <input checked="" type="checkbox"/> Office of Child Support Enforcement Data </div> <div style="width: 75%; padding-left: 10px;"> <p><small>* Indicates required information</small></p> <p>Type</p> <div style="border: 1px solid #ccc; padding: 2px; width: 100%; margin-bottom: 10px;"> -- </div> <p style="font-size: x-small;">Select from favorites or type source information</p> <p style="font-size: x-small;">▼ Show favorites</p> <p>Source</p> <div style="display: flex; margin-bottom: 10px;"> <div style="flex: 1; border: 1px solid #ccc; padding: 2px;"></div> <div style="flex: 1; border: 1px solid #ccc; padding: 2px; margin-left: 10px;"> <input type="checkbox"/> Unknown </div> <div style="flex: 1; border: 1px solid #ccc; padding: 2px; margin-left: 10px;"> ID </div> </div> <p>Address</p> <p><small>* Street 1</small> <input style="width: 150px;" type="text"/> <small>Street 2</small> <input style="width: 150px;" type="text"/> <small>Street 3</small> <input style="width: 150px;" type="text"/> <small>Street 4</small> <input style="width: 150px;" type="text"/></p> <p><small>City/Town</small> <input style="width: 150px;" type="text"/> <small>State/Territory</small> <input style="width: 100px;" type="text"/> <small>ZIP Code</small> <input style="width: 100px;" type="text"/></p> <p><input type="checkbox"/> Unknown</p> <p>Contact</p> <input style="width: 250px;" type="text"/> <p>Phone</p> <input style="width: 150px;" type="text"/> <p>Monthly Values</p> <p style="font-size: x-small;">Alleged Amount or Verified Amount is required</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th style="width: 10%;">* Date From (mm/yyyy)</th> <th style="width: 10%;">* Date To (mm/yyyy)</th> <th style="width: 10%;">Alleged Amount (\$)</th> <th style="width: 10%;">Verified Amount (\$)</th> <th style="width: 10%;">Court Ordered or IV-D Support Amount (\$)</th> <th style="width: 10%;">Other Deduction Amount (\$)</th> <th style="width: 10%;">Unknown</th> <th style="width: 10%;">Countable Amount (\$)</th> <th style="width: 10%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input style="width: 50px;" type="text"/></td> <td><input style="width: 50px;" type="text"/></td> <td><input style="width: 50px;" type="text"/></td> <td><input style="width: 50px;" type="text"/></td> <td><input style="width: 50px;" type="text"/></td> <td><input style="width: 50px;" type="text"/></td> <td><input type="checkbox"/></td> <td><input style="width: 50px;" type="text"/></td> <td style="text-align: center;">Delete</td> </tr> </tbody> </table> <p>▼ Show person remarks No remarks</p> <p>▼ Show file documentation notes No notes</p> <div style="margin-top: 10px;"> Add Another Undo Changes Delete </div> </div> </div>			* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input type="checkbox"/>	<input style="width: 50px;" type="text"/>	Delete
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions												
<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input type="checkbox"/>	<input style="width: 50px;" type="text"/>	Delete												

Next
Previous
Save & Exit

Dropdown list:

Type

--
Federally funded private - based on need
Other Federal assistance - based on need
Unknown

State/Territory

--	^
Alabama	
Alaska	
American Samoa	
Arizona	
Arkansas	
California	
Colorado	
Connecticut	
Delaware	
District of Columbia	
Federated States of Micronesia	
Florida	
Georgia	
Guam	
Hawaii	
Idaho	
Illinois	
Indiana	
Iowa	
Kansas	
Kentucky	
Louisiana	
Maine	
Marshall Islands	
Maryland	
Massachusetts	
Michigan	
Minnesota	
Mississippi	v

9. Alimony and Spousal Support

This page collects and or displays information regarding Alimony or Spousal Support being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Alimony or Spousal Support

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support**
- Child Support
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Type

--

Select from favorites or type source information

Source

Unknown ID

Address

Country: United States or U.S. Territory

Street 1: Street 2: Street 3: Street 4:

City/Town: State/Territory: -- ZIP Code:

Unknown

Contact

Phone

U.S. International

10-digit Number:

Monthly Values

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Show person remarks

No remarks

Show file documentation notes

No notes

Next Previous Save & Exit

Dropdown list:

Type

—
Court ordered alimony or support
Spousal impoverishment
Voluntary alimony or support
Unknown

Country – United States or U.S. Territory (Default)

United States or U.S. Territory	^
Afghanistan	
Albania	
Algeria	
Andorra	
Angola	
Anguilla	
Antarctica	
Antigua	
Antigua and Barbuda	
Argentina	
Armenia	
Aruba	
Ashmore and Cartier Islands	
Australia	
Austria	
Azerbaijan	
Bahamas, the	
Bahrain	
Baker Island	
Bangladesh	
Barbados	
Bassas da India	
Basutoland	
Belarus	
Belgium	
Belize	
Benin	
Benin	
Benin, West	v

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

10. Child Support

This page collects and/or displays information regarding Child Support being alleged or received and the amount of income being garnished for Child Support for the period.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Child Support

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support**
- Wages
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Type

--

Select from favorites or type source information

[Show favorites](#)

Source

Unknown ID

Address

Country

United States or U.S. Territory

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

Monthly Values

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

Dropdown list:

Type

—
Arrearages for adult retained by parent or other person
Court ordered - absent parent
Court ordered - parent in household
TANF pass-through
Voluntary - absent parent
Unknown

Country – United States or U.S. Territory (Default)

United States or U.S. Territory	▲
Afghanistan	
Albania	
Algeria	
Andorra	
Angola	
Anguilla	
Antarctica	
Antigua	
Antigua and Barbuda	
Argentina	
Armenia	
Aruba	
Ashmore and Cartier Islands	
Australia	
Austria	
Azerbaijan	
Bahamas, the	
Bahrain	
Baker Island	
Bangladesh	
Barbados	
Bassas da India	
Basutoland	
Belarus	
Belgium	
Belize	
Benin	
Benin	
Berlin, West	▼

State/Territory

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

11. Wages

This page collects and/or displays information regarding the verification of wages the person receives, the date the person receives the wages, and the amount of the wages along with any deductions. This page is updated by the user and other external applications (e.g. SSI Telephone Wage Reporting and SSI Monthly Wage Verification).

SSI Claims

[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Wages

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages**
- Self-Employment Income
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Select from favorites or type employer information
[Show favorites](#)

Employer name Unknown EIN

Address

Country

*Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

Monthly Values
Alleged Amount, Reported Amount or Verified Amount is required [More Info](#)

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Reported Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Add Another](#)
[Clear Page](#)
[Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

Dropdown list:

Country – United States or U.S. Territory (Default)

United States or U.S. Territory
Afghanistan
Albania
Algeria
Andorra
Angola
Anguilla
Antarctica
Antigua
Antigua and Barbuda
Argentina
Armenia
Aruba
Ashmore and Cartier Islands
Australia
Austria
Azerbaijan
Bahamas, the
Bahrain
Baker Island
Bangladesh
Barbados
Bassas da India
Basutoland
Belarus
Belgium
Belize
Benin
Benin, West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

12. Quarterly Wages Summary

This page displays information about wages in a quarterly format.

The employee compares this wage information with information on the alert produced by the State Wage Record Match. The alert is disposed of or developed based on the result of the employee comparison.

SSI Claims

[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Quarterly Wages Summary

Name	Social Security Number (SSN)	Role			
		Claimant			

Income

- Income Selection
- Wages
- Quarterly Wages Summary**
- Substantial Gainful Activity
- Work Expenses
- Office of Child Support Enforcement Data

Quarterly Wages Summary

Year 2021
 Expand all

Expand	Quarter	Employers	Quarterly Countable Amount (\$)	Quarterly Deduction Amount (\$)	Quarterly Gross Wages Amount (\$)
<input checked="" type="checkbox"/>	First	1 Employer No employer(s) present No employer(s) present No employer(s) present	1,500.00	0.00	1,500.00

Year 2020
No wages are present.

Year 2019
No wages are present.

Next
Previous
Save & Exit

13. Self-Employment Income

This page collects and/or displays information regarding self-employment income.

SSI Claims

[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Self-Employment Income

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Office of Child Support Enforcement Data

* Indicates required information

*** Business name** Unknown EIN

Address

Country

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Yearly Values
Alleged Amount or Verified Amount is required

* IRS Tax Year Type	* Tax Year From Date (mm/yyyy)	* Tax Year To Date (mm/yyyy)	Short Tax Year Reason	* Gross Income Amount (\$)	* Profit or Loss	Alleged (Profit or Loss) Net Amount (\$)	Verified (Profit or Loss) Net Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Monthly Countable (Profit or Loss) Amount (\$)	Actions
--					--					<input type="checkbox"/>		Delete

*** Self-employment is continuing or is expected to continue**

Yes No Unknown

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

[Next](#)
[Previous](#)
[Save & Exit](#)

[Add Another](#)
[Clear Page](#)
[Delete](#)

Dropdown list:

Country – United States or U.S. Territory (Default)

United States or U.S. Territory
Afghanistan
Albania
Algeria
Andorra
Angola
Anguilla
Antarctica
Antigua
Antigua and Barbuda
Argentina
Armenia
Aruba
Ashmore and Cartier Islands
Australia
Austria
Azerbaijan
Bahamas, the
Bahrain
Baker Island
Bangladesh
Barbados
Bassas da India
Basutoland
Belarus
Belgium
Belize
Benin
Benin
Berlin, West

State/Territory

—

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

IRS Tax Year Type

—

- Calendar
- Fiscal
- Short

Profit or Loss

—

- Loss
- Profit

14. Substantial Gainful Activity

The Substantial Gainful Activity (SGA) page collects information regarding the Claim Specialist's determination of the claimant's involvement in SGA.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

Substantial Gainful Activity (SGA)

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity**
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Blind Countable Income
- Plan to Achieve Self-Support
- Office of Child Support Enforcement Data

Is SGA involved? * Indicates required information

Yes No Unknown

Show person remarks
No remarks

Show file documentation notes
No notes

Undo Changes

Next Previous Save & Exit

15. Work Expenses

This page collects and/or displays information regarding work expenses incurred by claimants that have alleged disability or blindness on the Disability page. The system places this page in the path when an individual has alleged disability or blindness or low vision, and has reported Wages or Self-Employment income.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

Work Expenses

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses**
- Office of Child Support Enforcement Data

Impairment Related Work Expenses

Select from the following options

Select all the expenses that apply and provide appropriate details

- Attendant care services
- Drugs and medical services essential to work
- Durable medical devices
- Expendable medical supplies
- Impairment related equipment or services - Other
- Non-medical appliances and equipment
- Physical therapy
- Prosthesis
- Residential modifications - necessary to work
- Service animal
- Training on use of impairment related equipment - necessary for work
- Transportation costs
- Vehicle modification
- Other

There are no expenses to record

Unknown

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

[Undo Changes](#)

16. Work Expenses Summary

The Work Expenses Summary page displays information regarding blind or impairment related work expenses reported on the claim. Reported expenses are grouped by period. A period is a month or series of months with the same expenses in the same amounts. Periods are first displayed in collapsed format, and can be expanded to present each expense and the associated monthly expense amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Work Expenses Summary

Name	Social Security Number (SSN)	Role
		Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary**
- Office of Child Support Enforcement Data

Impairment Related Work Expenses

[Expand all](#)

Expand	Period	Expense Type	Monthly Countable Total (\$)
+	01/2021 - 03/2021		25.00

[Next](#) | [Previous](#) | [Save & Exit](#)

17. Sick Pay (Earned)

This page collects and/or displays information regarding earned sick pay being alleged or received and the amount.

SSI Claims
Go To ▾
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Sick Pay (Earned)

Name	Social Security Number (SSN)	Role Claimant																		
<div style="display: flex;"> <div style="width: 25%; border: 1px solid #ccc; padding: 5px;"> <p>Income</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Income Selection <input checked="" type="checkbox"/> Temporary Assistance for Needy Families <input checked="" type="checkbox"/> Refugee Cash Assistance <input checked="" type="checkbox"/> Bureau of Indian Affairs Assistance <input checked="" type="checkbox"/> Disaster Assistance <input checked="" type="checkbox"/> Adoption, Foster Care, and Kinship Guardianship Assistance <input checked="" type="checkbox"/> Other State, Local, and Tribal Assistance <input checked="" type="checkbox"/> Other Federal Income Based on Need <input checked="" type="checkbox"/> Alimony and Spousal Support <input checked="" type="checkbox"/> Child Support <input checked="" type="checkbox"/> Wages <input checked="" type="checkbox"/> Quarterly Wages Summary <input checked="" type="checkbox"/> Self-Employment Income <input checked="" type="checkbox"/> Substantial Gainful Activity <input checked="" type="checkbox"/> Work Expenses <input type="radio"/> Sick Pay (Earned) <input type="radio"/> Sick Pay (Unearned) <input type="radio"/> Workers' Compensation <input type="radio"/> Unemployment Compensation <input type="radio"/> Social Security Benefits <input type="radio"/> Black Lung Benefits <input type="radio"/> Office of Personnel Management Benefits <input type="radio"/> Railroad Board Benefits <input type="radio"/> Veterans Affairs Payments <input type="radio"/> Pensions, Annuities, Retirement, and Disability Payments <input type="radio"/> Interest <input type="radio"/> Dividends <input type="radio"/> Royalties and Honoraria (Unearned) <input type="radio"/> Rental and Lease Income <input type="radio"/> Other Income <input type="radio"/> Blind Countable Income <input type="radio"/> Plan to Achieve Self-Support <input type="radio"/> School Data <input checked="" type="radio"/> Office of Child Support Enforcement Data </div> <div style="width: 75%; padding-left: 10px;"> <p>* Indicates required information</p> <p>Select from favorites or type source information</p> <p>Show favorites</p> <p>* Source</p> <div style="display: flex; justify-content: space-between;"> <input style="width: 60%;" type="text"/> <input type="checkbox"/> Unknown <input style="width: 15%; text-align: center;" type="text" value="EIN"/> </div> <hr/> <p>Address</p> <p>Country United States or U.S. Territory ▾</p> <div style="display: flex; justify-content: space-between;"> <p>Street 1 <input style="width: 15%;" type="text"/></p> <p>Street 2 <input style="width: 15%;" type="text"/></p> <p>Street 3 <input style="width: 15%;" type="text"/></p> <p>Street 4 <input style="width: 15%;" type="text"/></p> </div> <p>City/Town <input style="width: 20%;" type="text"/> State/Territory <input style="width: 15%; text-align: center;" type="text"/> ZIP Code <input style="width: 15%;" type="text"/></p> <p><input type="checkbox"/> Unknown</p> <hr/> <p>Contact</p> <input style="width: 100%;" type="text"/> <hr/> <p>Phone</p> <p><input checked="" type="radio"/> U.S. <input type="radio"/> International</p> <p>10-digit Number <input style="width: 50%;" type="text"/></p> <hr/> <p>Monthly Values</p> <p>Alleged Amount or Verified Amount is required</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 10%;">* Date From (mm/yyyy)</th> <th style="width: 10%;">* Date To (mm/yyyy)</th> <th style="width: 10%;">Alleged Amount (\$)</th> <th style="width: 10%;">Verified Amount (\$)</th> <th style="width: 10%;">Court Ordered or IV-D Support Amount (\$)</th> <th style="width: 10%;">Other Deduction Amount (\$)</th> <th style="width: 10%;">Unknown</th> <th style="width: 10%;">Countable Amount (\$)</th> <th style="width: 10%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input style="width: 50%;" type="text"/></td> <td><input style="width: 50%;" type="text"/></td> <td><input style="width: 50%;" type="text"/></td> <td><input style="width: 50%;" type="text"/></td> <td><input style="width: 50%;" type="text"/></td> <td><input style="width: 50%;" type="text"/></td> <td><input type="checkbox"/></td> <td><input style="width: 50%;" type="text"/></td> <td>Delete</td> </tr> </tbody> </table> <hr/> <p>Show person remarks</p> <p>No remarks</p> <p>Show file documentation notes</p> <p>No notes</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Add Another Clear Page Delete </div> </div> </div>			* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input type="checkbox"/>	<input style="width: 50%;" type="text"/>	Delete
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions												
<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input type="checkbox"/>	<input style="width: 50%;" type="text"/>	Delete												

[Next](#)
[Previous](#)
[Save & Exit](#)

Dropdown list:

Country – United States or U.S. Territory (Default)

United States or U.S. Territory
Afghanistan
Albania
Algeria
Andorra
Angola
Anguilla
Antarctica
Antigua
Antigua and Barbuda
Argentina
Armenia
Aruba
Ashmore and Cartier Islands
Australia
Austria
Azerbaijan
Bahamas, the
Bahrain
Baker Island
Bangladesh
Barbados
Bassas da India
Basutoland
Belarus
Belgium
Belize
Benin
Berlin, West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

18. Sick Pay (Unearned)

This page collects and/or displays information regarding unearned sick pay being alleged or received and the amount.

SSI Claims
▼

Go To

General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Sick Pay (Unearned)

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Temporary Assistance for Needy Families
- Refugee Cash Assistance
- Bureau of Indian Affairs Assistance
- Disaster Assistance
- Adoption, Foster Care, and Kinship Guardianship Assistance
- Other State, Local, and Tribal Assistance
- Other Federal Income Based on Need
- Alimony and Spousal Support
- Child Support
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Sick Pay (Earned)
- Sick Pay (Unearned)
- Workers' Compensation
- Unemployment Compensation
- Social Security Benefits
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information
Select from favorites or type source information
[Show favorites](#)

Source Unknown

Address
Country

* Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone
 U.S. International
10-digit Number

Monthly Values
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

Dropdown list:

Country – United States or U.S. Territory (Default)

United States or U.S. Territory
Afghanistan
Albania
Algeria
Andorra
Angola
Anguilla
Antarctica
Antigua
Antigua and Barbuda
Argentina
Armenia
Aruba
Ashmore and Cartier Islands
Australia
Austria
Azerbaijan
Bahamas, the
Bahrain
Baker Island
Bangladesh
Barbados
Bassas da India
Basutoland
Belarus
Belgium
Belize
Benin
Benin West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

19. Workers' Compensation

This page collects and displays information about Workers' Compensation benefits being alleged or received.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Workers' Compensation

Name Social Security Number (SSN) Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Workers' Compensation**
- Unemployment Compensation
- Blind Countable Income
- Plan to Achieve Self-Support
- Office of Child Support Enforcement Data

Type

--

Select from favorites or type source information

Show favorites

Source

Unknown ID

Address

Country United States or U.S. Territory

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory -- ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

Monthly Values

Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Show person remarks

No remarks

Show file documentation notes

No notes

Dropdown list:

Type

--

Employer or insurance company

Federal

State

Unknown

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

20. Unemployment Compensation

This page collects and/or displays information regarding the type of unemployment being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Unemployment Compensation

Name Social Security Number (SSN) Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Office of Child Support Enforcement Data

Source

Unknown ID

Address

Country
United States or U.S. Territory

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

Monthly Values
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Show person remarks
No remarks

Show file documentation notes
No notes

Dropdown list:

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

21. Social Security Benefits

This page collects and/or displays information regarding the type of Social Security being alleged or received and the amount. It is updated by the user, iClaim and the Master Beneficiary Record (MBR) interface with SSI systems.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

Social Security Benefit

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Self-Employment Income
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Social Security Benefits**
- Black Lung Benefits
- Office of Personnel Management Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

*** ID**

*** Pending Claim**
 Yes No

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

22. Black Lung Benefits

This page collects and/or displays information regarding the type of Black Lung Benefit being alleged or received and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | **Benefit Leads** | Summary | Claim Edits and Alerts

Black Lung Benefit

Name: _____ Social Security Number (SSN): _____ Role: Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits**
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

* Type:

* ID [More Info](#): Unknown

Monthly Values
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list:

Type

Part B

Part C

Unknown

23. Office of Personnel Management Benefits

This page collects and/or displays information regarding Office of Personnel Management Benefit being alleged or received and the amount. OPM makes U.S. Civil Service and Federal Employee Retirement System (FERS) payments for disability, retirement, or death. When this information is updated to the SSR via the OPM interface, the system will also update the data on the Centrally Stored Information (CSI). Open a standalone post entitlement (PE) event via MSSICS to send the updated data to the SSR. Cost of living allocations (COLAs) are only updated for those individuals on the SSR.

SSi Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Office of Personnel Management Benefit

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

* ID Unknown

Monthly Values
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

Show person remarks
No remarks

Show file documentation notes
No notes

Modal Window:

Get ID

Get Office of Personnel Management (OPM) ID

* Indicates required information

Enter the Civil Service Claim Number (CSCN) from the Civil Service Award letter, including any prefix or suffix. For more information, refer to [SM 02002.210](#)

* **Civil Service Claim Number (CSCN)**

24. Railroad Board Benefits

This page collects and/or displays information regarding the type of Railroad Board Benefit being alleged or received, and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | **Income** | Benefit Leads | Summary | Claim Edits and Alerts

Railroad Board Benefits

Name | Social Security Number (SSN) | Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits**
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

* Type

* ID
 Unknown

Monthly Values
 Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Double Counting Overpayment Recovery Amount (\$)	Double Counting Applies	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="button" value="Delete"/>

No remarks
 No notes

Dropdown list:

Type

—

Annuity

Sickness

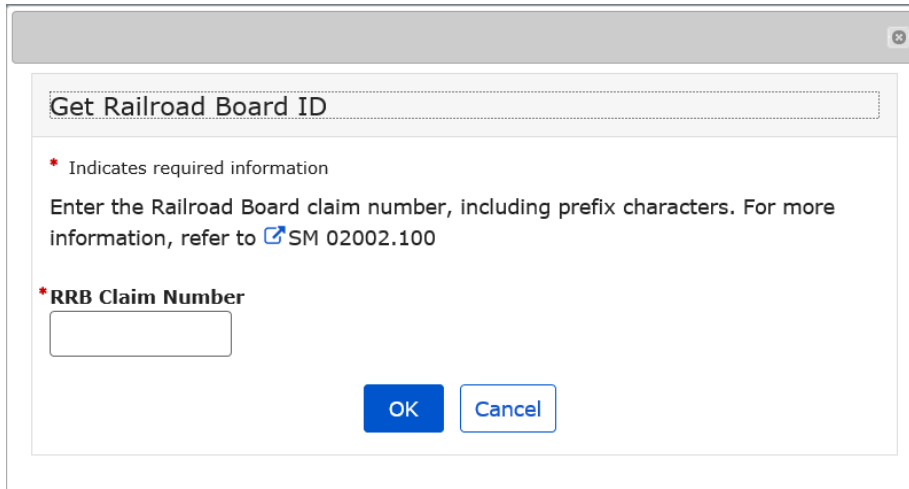
Strike benefits

Unemployment

Unknown

Modal Window:

Get ID



The image shows a modal window with a title bar that says "Get Railroad Board ID". Inside the window, there is a sub-header "Get Railroad Board ID" in a dashed box. Below this, there is a red asterisk followed by the text "Indicates required information". The main instruction reads: "Enter the Railroad Board claim number, including prefix characters. For more information, refer to [SM 02002.100](#)". Below the instruction is a red asterisk followed by the label "RRB Claim Number". Underneath the label is an empty text input field. At the bottom right of the window are two buttons: "OK" (a solid blue button) and "Cancel" (a white button with a blue border).

25. Veterans Affairs Payments

This page collects and/or displays information regarding the type of Veterans Affairs Payments income being alleged or received, and the amount.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Veterans Affairs Payment

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments**
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

* Type [More Info](#)

--

* Name of Beneficiary

* First M.I. * Last

Unknown

* ID

Get ID Unknown

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

Add Another Clear Page Delete

Next Previous Save & Exit

Dropdown list:

Type

Compensation - not based on need
Disability insurance payment - rider
Educational benefits
Life insurance payment
Other VA payment - based on need
Other VA payment - not based on need
Parents' dependency and indemnity compensation
Pension - based on need
Pension - Medal of Honor
Pension - special act of Congress
VA caregivers payment
Unknown

Modal Window:

Get ID

SM 02002.010'. There are three required fields: 1. '* VA claim number' with a text input field. 2. '* VA payee' with a dropdown menu showing '--'. 3. '* VA beneficiary receiving portion of augmented benefits' with a dropdown menu showing '--'. At the bottom are 'OK' and 'Cancel' buttons."/>

Get VA ID Information

* Indicates required information

Please provide the following information for system to automatically construct the VA ID information. For more information refer to [SM 02002.010](#)

* **VA claim number**

* **VA payee**

* **VA beneficiary receiving portion of augmented benefits**

OK Cancel

Get ID Dropdown list:

VA Payee

--

00 - Veteran

10 - Spouse, Widow(er)

11 Child (Direct Payment)

12 Child (Direct Payment)

13 Child (Direct Payment)

14 Child (Direct Payment)

15 Child (Direct Payment)

16 Child (Direct Payment)

17 Child (Direct Payment)

18 Child (Direct Payment)

19 Child (Direct Payment)

50 - Father

60 - Mother

70 - Widow(er), child, parent (death service award)

71 - Widow(er), child, parent (death service award)

72 - Widow(er), child, parent (death service award)

73 - Widow(er), child, parent (death service award)

74 - Widow(er), child, parent (death service award)

75 - Widow(er), child, parent (death service award)

76 - Widow(er), child, parent (death service award)

77 - Widow(er), child, parent (death service award)

78 - Widow(er), child, parent (death service award)

99 - Veteran (Institutional award)

VA beneficiary receiving portion of augmented benefits

--

Dependent (Spouse or child) receiving dependent's portion

Other

Veteran or Widow(er) receiving primary portion

26. Pensions, Annuities, Retirement, and Disability Payments

This page collects and/or displays information regarding the type of pension, annuity, retirement, disability payment, or similar income being alleged or received and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Pension, Annuity, Retirement, or Disability Payment

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

Type

Indicates required information

Type: --

Select from favorites or type source information

Show favorites

Source: Unknown ID: Unknown

Address

Country: United States or U.S. Territory

Street 1: Street 2: Street 3: Street 4:

City/Town: State/Territory: -- ZIP Code:

Unknown

Contact

Phone

U.S. International

10-digit Number:

Show person remarks: No remarks

Show file documentation notes: No notes

Next Previous Save & Exit

Dropdown list:

Type

-
- Annuity
- Disability insurance
- Federal - non-OPM
- Foreign government
- Foreign private
- Private disability
- Private retirement
- State annuity for certain veterans
- State disability insurance benefits
- U.S. local government
- U.S. military
- U.S. state government
- Union disability
- Union retirement
- Other
- Unknown

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Berlin, West

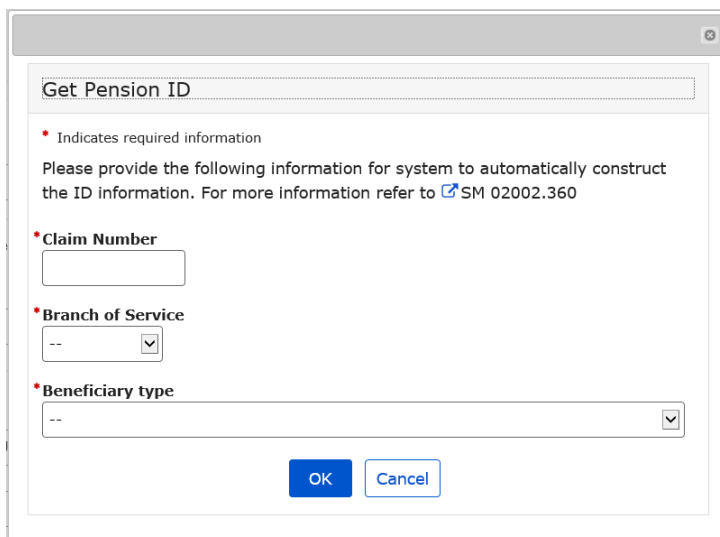
State/Territory



A scrollable list of US states and territories. The list is currently showing the following items from top to bottom: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. The list is enclosed in a rectangular box with a light blue header bar and a vertical scrollbar on the right side.

Modal Window:

Get ID



A modal window titled "Get Pension ID" with a close button in the top right corner. The window contains the following text and fields:

- A red asterisk icon followed by the text: "Indicates required information"
- Text: "Please provide the following information for system to automatically construct the ID information. For more information refer to [SM 02002.360](#)"
- A red asterisk icon followed by the label "Claim Number" and an empty text input field.
- A red asterisk icon followed by the label "Branch of Service" and a dropdown menu with "--" selected.
- A red asterisk icon followed by the label "Beneficiary type" and a dropdown menu with "--" selected.
- At the bottom, there are two buttons: "OK" (blue) and "Cancel" (white with blue border).

Get ID – Dropdown list:

Branch of Service

--
Air Force
Army
Coast Guard
Marines
Navy

Beneficiary Type

--
Alottee
Retired Serviceman's Family Protection Plan with eligibility date 09/01/1974 or later
Retired Serviceman's Family Protection Plan with eligibility date before 09/01/1974
Retiree
Survivor Benefit Plan type 1, 2, 3, 4, or 5
Survivor Benefit Plan type 6

27. Interest

This page collects and/or displays information regarding the type of interest being alleged or received and the amount.

SSI Claims

[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Interest

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest**
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Type

Select from favorites or type source information
[Show favorites](#)

Source
 Unknown ID

Address
Country

Street 1 **Street 2** **Street 3** **Street 4**

City/Town **State/Territory** **ZIP Code**

Unknown

Contact

Phone
 U.S. International
10-digit Number

Excluded

Monthly Values
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

Dropdown list:

Type

-
- Bonds - other
- Bonds - U.S. savings
- Burial funds
- Checking
- Credit union
- Holiday club
- Individual Indian Money account
- Life insurance
- Mutual fund
- Promissory notes or loans
- Savings
- Stock
- Time deposits
- Trust
- Other
- Unknown

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin, West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

28. Dividends

This page collects and/or displays information regarding the type of Dividend being alleged or received and the amount.

SSI Claims

[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Dividend

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, retirement, and Disability Payments
- Interest
- Dividends**
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Type

Select from favorites or type source information
[Show favorites](#)

Source
 Unknown ID

Address
Country

Street 1 **Street 2** **Street 3** **Street 4**

City/Town **State/Territory** **ZIP Code**

Unknown

Contact

Phone
 U.S. International
10-digit Number

Excluded

Monthly Values
Alleged Amount or Verified Amount is required

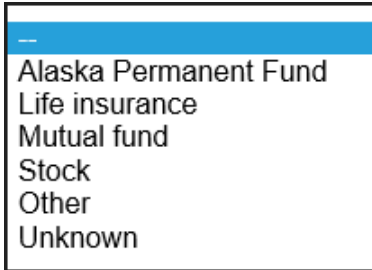
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

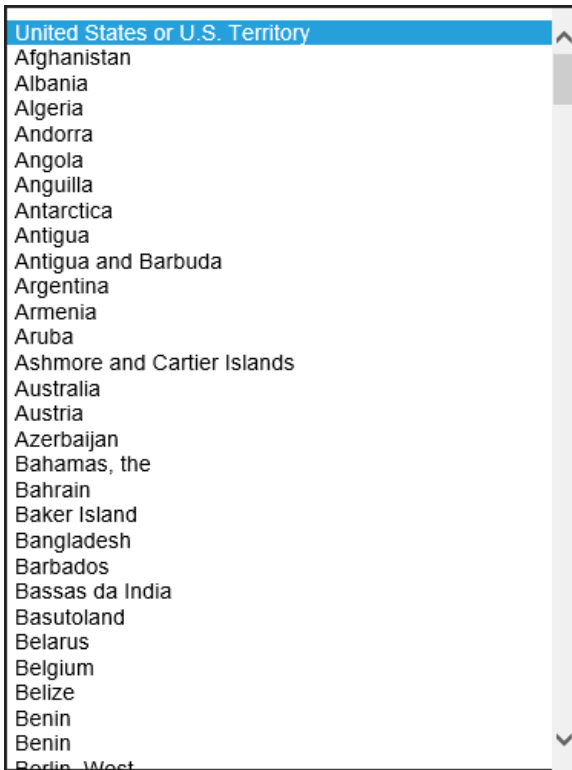
Dropdown list:

Type



A dropdown menu with a blue header bar containing a minus sign. The menu is open, showing a list of options: Alaska Permanent Fund, Life insurance, Mutual fund, Stock, Other, and Unknown.

Country – United States or U.S. Territory (Default)



A dropdown menu with a blue header bar containing the text "United States or U.S. Territory". The menu is open, showing a scrollable list of countries and territories. The visible items are: Afghanistan, Albania, Algeria, Andorra, Angola, Anguilla, Antarctica, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ashmore and Cartier Islands, Australia, Austria, Azerbaijan, Bahamas, the, Bahrain, Baker Island, Bangladesh, Barbados, Bassas da India, Basutoland, Belarus, Belgium, Belize, Benin, and Benin, West.

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

29. Royalties and Honoraria (Unearned)

This page collects and/or displays information about the type of royalties and/or honorarium (unearned) being alleged or received and the amount. It is counted as unearned income. If the royalties or honoraria (unearned) are determined to be earned, then enter as wages on the Wages page.

SSI Claims

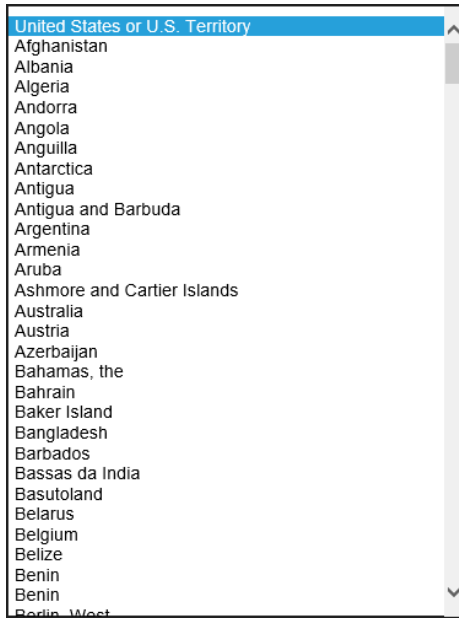
[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Royalties or Honorarium (Unearned)

Name	Social Security Number (SSN)	Role Claimant																		
<div style="display: flex;"> <div style="width: 25%; border-right: 1px solid #ccc; padding-right: 10px;"> <p>Income</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Income Selection <input checked="" type="checkbox"/> Wages <input type="checkbox"/> Quarterly Wages Summary <input checked="" type="checkbox"/> Substantial Gainful Activity <input checked="" type="checkbox"/> Work Expenses <input type="checkbox"/> Work Expenses Summary <input checked="" type="checkbox"/> Unemployment Compensation <input checked="" type="checkbox"/> Black Lung Benefits <input checked="" type="checkbox"/> Office of Personnel Management Benefits <input checked="" type="checkbox"/> Railroad Board Benefits <input checked="" type="checkbox"/> Veterans Affairs Payments <input checked="" type="checkbox"/> Pensions, Annuities, Retirement, and Disability Payments <input checked="" type="checkbox"/> Interest <input checked="" type="checkbox"/> Dividends <input checked="" type="radio"/> Royalties and Honoraria (Unearned) <input type="radio"/> Rental and Lease Income <input type="radio"/> Other Income <input type="radio"/> Blind Countable Income <input type="radio"/> Plan to Achieve Self-Support <input type="radio"/> School Data <input checked="" type="radio"/> Office of Child Support Enforcement Data </div> <div style="width: 75%; padding-left: 10px;"> <p><small>* Indicates required information</small></p> <p>Select from favorites or type source information</p> <p><small>▼ Show favorites</small></p> <p>* Source <input type="text"/> <input type="checkbox"/> Unknown ID <input type="text"/></p> <hr/> <p>Address</p> <p>Country <input type="text" value="United States or U.S. Territory"/></p> <p>* Street 1 <input type="text"/> Street 2 <input type="text"/> Street 3 <input type="text"/> Street 4 <input type="text"/></p> <p>City/Town <input type="text"/> State/Territory <input type="text" value="--"/> ZIP Code <input type="text"/></p> <p><input type="checkbox"/> Unknown</p> <hr/> <p>Contact <input type="text"/></p> <hr/> <p>Phone</p> <p><input checked="" type="radio"/> U.S. <input type="radio"/> International</p> <p>10-digit Number <input type="text"/></p> <hr/> <p>Monthly Values</p> <p><small>Alleged Amount or Verified Amount is required</small></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>* Date From (mm/yyyy)</th> <th>* Date To (mm/yyyy)</th> <th>Alleged Amount (\$)</th> <th>Verified Amount (\$)</th> <th>Court Ordered or IV-D Support Amount (\$)</th> <th>Other Deduction Amount (\$)</th> <th>Unknown</th> <th>Countable Amount (\$)</th> <th>Actions</th> </tr> </thead> <tbody> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="checkbox"/></td> <td></td> <td><input type="button" value="Delete"/></td> </tr> </tbody> </table> <hr/> <p><small>▼ Show person remarks</small></p> <p>No remarks</p> <p><small>▼ Show file documentation notes</small></p> <p>No notes</p> </div> </div>			* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions												
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>												

Dropdown list:

Country – United States or U.S. Territory (Default)



State/Territory



30. Rental and Lease Income

This page collects and/or displays information regarding the type of Rental or Lease Income being alleged or received and the amount.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Rental Or Lease Income

Name	Social Security Number (SSN)	Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income**
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Type [More Info](#)

--

Select from favorites or type source information

[Show favorites](#)

Description

Unknown

Source

Unknown

ID

Address

Country

United States or U.S. Territory

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory

--

 ZIP Code

Unknown

Contact

Phone

U.S. International

10-digit Number

Monthly Values

Alleged Gross or Verified Gross is required. Alleged Expenses or Verified Expenses is required [Net Rental Income Program \(NRIP\)](#)

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Gross Amount (\$)	Verified Gross Amount (\$)	Alleged Expenses Amount (\$)	Verified Expenses Amount (\$)	Court Ordered or IV-D Support Amount (\$)	Other Deduction Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	Delete

[Show person remarks](#)

No remarks

[Show file documentation notes](#)

No notes

Dropdown list:

Type

-
- Land - not PESS
- Meets PESS criteria that produces non-business income
- Meets PESS criteria that represents government authority
- Other real property - not PESS
- Personal property - not PESS
- Sublet
- Other
- Unknown

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

31. Other Income

This page collects and/or displays information regarding the type of “other income” being alleged or received and the amount. “Other Income” is any type of income that cannot be collected on any of the other income pages.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Other Income

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income**
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

Type

Indicates required information

Type

Select from favorites or type source information

Show favorites

Source

Unknown

Address

Country

Street 1 **Street 2** **Street 3** **Street 4**

City/Town **State/Territory** **ZIP Code**

Unknown

Contact

Phone

U.S. International

10-digit Number

Show person remarks

No remarks

Show file documentation notes

No notes

Dropdown list:

Type

- Alaska Longevity Bonus - countable
- Alaska Longevity Bonus - excludable
- Alaska Native Claims distribution over \$2,000 per year
- Austrian social insurance - certain payments not based on wage credits
- Cash
- Community service block grants assistance
- Death benefits - unspent
- Emergency assistance payments - not income or assistance based on need
- Gambling winnings or prizes
- Gifts
- Grants, fellowships, or scholarships not used for educational benefits
- Indian fishing rights income
- Indian tribal funds distributed to individuals
- Indian trust or restricted lands - derived from individual interest in excess of \$2,000 a year
- Inheritance - cash
- Inheritance - in-kind
- Insurance proceeds
- Job Corps dependents allowance
- Job Training Partnership Act
- Jury duty
- Money paid to residents of a public institution where no employer/employee relationship exists
- Remuneration from work - in-kind
- Settlements or awards
- Stipends
- Tips under \$20 monthly
- Trade Readjustment Act payments
- Uniformed Services special pay and allowances
- Unstated income
- Victims' compensation - State established fund exclusion

Country – United States or U.S. Territory (Default)

- United States or U.S. Territory
- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Ashmore and Cartier Islands
- Australia
- Austria
- Azerbaijan
- Bahamas, the
- Bahrain
- Baker Island
- Bangladesh
- Barbados
- Bassas da India
- Basutoland
- Belarus
- Belgium
- Belize
- Benin
- Benin
- Benin West

State/Territory

-
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi

32. Blind Countable Income

This page collects and/or displays information regarding the type of Blind Countable Income being alleged or received, and the amount.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Blind Countable Income

Name Social Security Number (SSN) Role Claimant

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income**
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Monthly Values
Alleged Amount or Verified Amount is required

* Date From (mm/yyyy)	* Date To (mm/yyyy)	Alleged Amount (\$)	Verified Amount (\$)	Unknown	Countable Amount (\$)	Actions
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>		<input type="button" value="Delete"/>

Show person remarks
No remarks

Show file documentation notes
No notes

33. Plan to Achieve Self-Support

This page collects and/or displays information regarding a Plan for Achieving Self-Support (PASS). The PASS is a disabled or blind person's work goal to achieve self-support. Approved expense items used for a PASS program are deducted from earned income.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Plan to Achieve Self-Support

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	---------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support**
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

Work goal
(250 characters maximum)

Characters remaining: 250

Start month (mm/yyyy) **Anticipated ending month and year (mm/yyyy)**

mm/yyyy mm/yyyy

PASS approved

Yes No

Notice date (mm/dd/yyyy)

mm/dd/yyyy

Show person remarks
No remarks

Show file documentation notes
No notes

34. School Data

This page collects information regarding school attendance and student status for individuals (both eligible and ineligible) who are under age 22 and attending school regularly. This information is used to determine whether a student qualifies for the Student Earned Income Exclusion. This information is also used to determine if a child who is a student, between 18 and 22, not married, not eligible for SSI and living in the household of the claimant, is an ineligible child for inclusion in the deeming process.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

School Data

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Black Lung Benefits
- Office of Personnel Management Benefits
- Railroad Board Benefits
- Veterans Affairs Payments
- Pensions, Annuities, Retirement, and Disability Payments
- Interest
- Dividends
- Royalties and Honoraria (Unearned)
- Rental and Lease Income
- Other Income
- Blind Countable Income
- Plan to Achieve Self-Support
- School Data
- Office of Child Support Enforcement Data

* Indicates required information

* Collect school data [More Info](#)

Yes No Decide later

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

Screenshot – Collect School Data - Yes

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

School Data

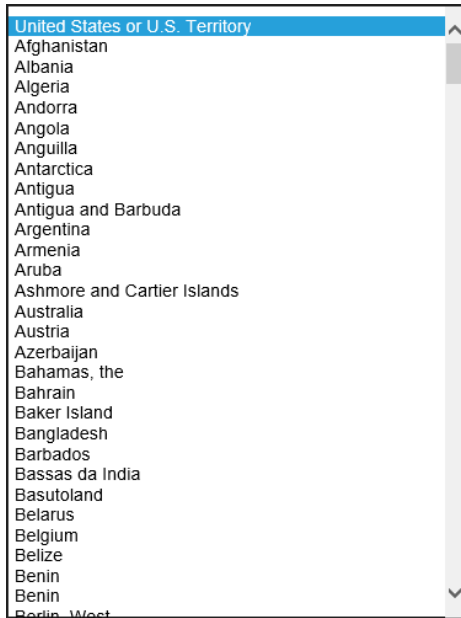
Name	Social Security Number (SSN)	Role Claimant																		
<div style="display: flex;"> <div style="width: 25%; border-right: 1px solid #ccc; padding-right: 5px;"> <p>Income</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Income Selection <input checked="" type="checkbox"/> Wages <input type="checkbox"/> Quarterly Wages Summary <input checked="" type="checkbox"/> Substantial Gainful Activity <input checked="" type="checkbox"/> Work Expenses <input type="checkbox"/> Work Expenses Summary <input checked="" type="checkbox"/> Unemployment Compensation <input checked="" type="checkbox"/> Black Lung Benefits <input checked="" type="checkbox"/> Office of Personnel Management Benefits <input checked="" type="checkbox"/> Railroad Board Benefits <input checked="" type="checkbox"/> Veterans Affairs Payments <input checked="" type="checkbox"/> Pensions, Annuities, Retirement, and Disability Payments <input checked="" type="checkbox"/> Interest <input checked="" type="checkbox"/> Dividends <input checked="" type="checkbox"/> Royalties and Honoraria (unearned) <input checked="" type="checkbox"/> Rental and Lease Income <input checked="" type="checkbox"/> Other Income <input checked="" type="checkbox"/> Blind Countable Income <input checked="" type="checkbox"/> Plan to Achieve Self-Support <input type="checkbox"/> School Data <input type="checkbox"/> Office of Child Support Enforcement Data </div> <div style="width: 75%; padding-left: 5px;"> <p><small>* Indicates required information</small></p> <p>* Collect school data More Info</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Decide later</p> <p>Select from favorites or type school information</p> <p>Show favorites</p> <p>* School name</p> <input style="width: 100%;" type="text"/> <input type="checkbox"/> Unknown <p><small>Name of school, home school curriculum name, etc.</small></p> <hr/> <p>Address</p> <p>Country United States or U.S. Territory</p> <p>* Street 1 <input style="width: 150px;" type="text"/> Street 2 <input style="width: 150px;" type="text"/> Street 3 <input style="width: 150px;" type="text"/> Street 4 <input style="width: 150px;" type="text"/></p> <p>City/Town <input style="width: 150px;" type="text"/> State/Territory <input style="width: 100px;" type="text"/> ZIP Code <input style="width: 100px;" type="text"/></p> <p><input type="checkbox"/> Unknown</p> <hr/> <p>Contact</p> <input style="width: 100%;" type="text"/> <hr/> <p>Phone</p> <p><input checked="" type="radio"/> U.S. <input type="radio"/> International</p> <p>10-digit Number <input style="width: 150px;" type="text"/></p> <hr/> <p>* Dates of Attendance</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">* Date From (mm/yyyy)</th> <th style="width: 30%;">* Date To (mm/yyyy)</th> <th style="width: 20%;">Unknown</th> <th style="width: 20%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input style="width: 100%;" type="text"/></td> <td><input style="width: 100%;" type="text"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Delete</td> </tr> </tbody> </table> <hr/> <p>* Course of study</p> <input style="width: 100%;" type="text"/> <input type="checkbox"/> Unknown <hr/> <p>* Hours per week</p> <input style="width: 50px;" type="text"/> <input type="checkbox"/> Unknown <hr/> <p>* Student Status Determination</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">* Date From (mm/yyyy)</th> <th style="width: 30%;">* Date To (mm/yyyy)</th> <th style="width: 20%;">* Child is a Student</th> <th style="width: 20%;">Unknown</th> <th style="width: 20%;">Actions</th> </tr> </thead> <tbody> <tr> <td><input style="width: 100%;" type="text"/></td> <td><input style="width: 100%;" type="text"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Delete</td> </tr> </tbody> </table> <hr/> <p>* Student enrollment verified</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p>Show person remarks</p> <p>No remarks</p> <p>Show file documentation notes</p> <p>No notes</p> </div> </div>			* Date From (mm/yyyy)	* Date To (mm/yyyy)	Unknown	Actions	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	Delete	* Date From (mm/yyyy)	* Date To (mm/yyyy)	* Child is a Student	Unknown	Actions	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	Delete
* Date From (mm/yyyy)	* Date To (mm/yyyy)	Unknown	Actions																	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	Delete																	
* Date From (mm/yyyy)	* Date To (mm/yyyy)	* Child is a Student	Unknown	Actions																
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	Delete																

Add Another
Clear Page
Delete

Next
Previous
Save & Exit

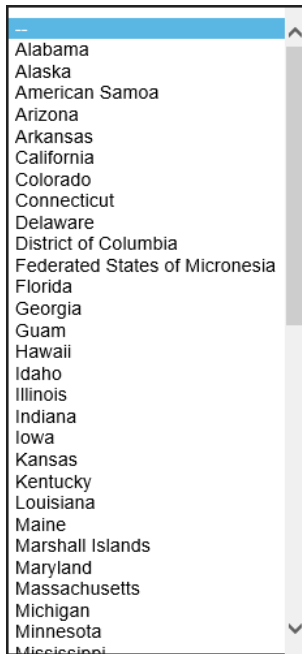
Dropdown list:

Country – United States or U.S. Territory (Default)



A dropdown menu with a blue header bar containing the text "United States or U.S. Territory". Below the header, a list of countries and territories is displayed in black text. The list includes: Afghanistan, Albania, Algeria, Andorra, Angola, Anguilla, Antarctica, Antigua, Antigua and Barbuda, Argentina, Armenia, Aruba, Ashmore and Cartier Islands, Australia, Austria, Azerbaijan, Bahamas, the, Bahrain, Baker Island, Bangladesh, Barbados, Bassas da India, Basutoland, Belarus, Belgium, Belize, Benin, Benin, and Berlin, West. A vertical scrollbar is visible on the right side of the list.

State/Territory



A dropdown menu with a blue header bar containing a hyphen "-". Below the header, a list of U.S. states and territories is displayed in black text. The list includes: Alabama, Alaska, American Samoa, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Federated States of Micronesia, Florida, Georgia, Guam, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Marshall Islands, Maryland, Massachusetts, Michigan, Minnesota, and Mississippi. A vertical scrollbar is visible on the right side of the list.

35. Office of Child Support Enforcement Data

Child Support Enforcement is a mini-path function in SSI Claims system. Upon accessing the Child Support Enforcement function, the user is directed to query page containing data from the Office of Child Support Enforcement (OCSE). The ICSE function links to the OCSE Query pages, which house data from the National Directory of New Hires (NDNH). OCSE controls and maintains the data in NDNH.

The Child Support Enforcement function is automatically placed in the SSI Claims system path when required by current Policy in Initial Claims events and is available to the user in other SSI Claims system events upon request. The Child Support Enforcement page allows the user to retrieve and view New Hire, Wage, and Unemployment data directly from NDNH without having to exit the SSI Claims system.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Child Support Enforcement Data

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Income

- Income Selection
- Wages
- Quarterly Wages Summary
- Substantial Gainful Activity
- Work Expenses
- Work Expenses Summary
- Unemployment Compensation
- Blind Countable Income
- Plan to Achieve Self-Support
- Office of Child Support Enforcement Data

Next Previous Save & Exit

Office of Child Support Enforcement (OCSE) Data

Jump to report section [] Go

New Hire
No data to display
Back to Top

Wages
No data to display
Back to Top

Unemployment
No data to display

Dropdown list:

Jump to report section

Wages
Unemployment

F. Benefit Leads

1. Potential Eligibility for Other Benefits Selection

This page collects the claimant and claimant spouse's allegation regarding their prior involvement with military service, work for railroad, federal, state, or local government, work under a union or private pension plan, and potential eligibility under a foreign government's social security system or pension plan. It also collects the claimant and claimant spouse's allegations as to their spouse, former spouse, or parent's prior involvement with military service, work for railroad, federal, state, or local government, work under a union or private pension plan and potential eligibility under a foreign government's social security system or pension plan. It also inquires about their eligibility for Supplemental Nutrition Assistance Program (SNAP), Medicaid, health expenses and third party liability coverage.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Potential Eligibility for Other Benefits Selection

Name	Social Security Number (SSN)	Role
		Claimant

Benefit Leads

Benefit Lead Selection

Title II Disability

*** Indicates required information**

Benefit Leads

*** Supplemental Nutrition Assistance Program (SNAP)**
Select yes to collect information from the claimant about SNAP, formerly the Food Stamp program

Yes No

*** Health Expenses**
Select yes to collect information from the claimant and claimant spouse about any health expenses, third party insurance or unpaid medical expenses

Yes No

Did you, your spouse, a former spouse, child or parent (if you are filing as a child) ever:

*** Serve in the military** [Check DRAMS/VBAQ](#)

Yes No Unknown

*** Work in the railroad industry**

Yes No Unknown

*** Work for the federal government**

Yes No Unknown

*** Work for a state or local government**

Yes No Unknown

*** Belong to a union with a pension plan**

Yes No Unknown

*** Work for a private employer with a pension plan**
Include work for a private employer with a pension plan or other benefit plan

Yes No Unknown

*** Have coverage or become eligible under a social security or pension plan of a country other than the U.S.**
Include potential eligibility for foreign benefits based on citizenship, residency or work covered under a foreign country with a social security program

Yes No Unknown

Clear Page

Next Previous Save & Exit

2. Supplemental Nutrition Assistance Program (SNAP)

The Supplemental Nutrition Assistance Program (SNAP) page exists in the Supplemental Security Income (SSI) application, and allows the user to collect data used to determine whether or not:

- A claimant wants to file for SNAP
- SSA can take the claimant's SNAP application
- A claimant wants to file their SNAP application at the SSA Field Office

SNAP data is collected for the eligible individual. SNAP eligibility is determined based on the household as the entity and not an individual, so this page only appears once, even if a couple is filing.

When a claimant does not wish to file for assistance at the SSA office, an explanation is recorded for policy documentation, and does not appear on their application.

The screenshot shows the 'Supplemental Nutrition Assistance Program (SNAP)' form within the 'SSI Claims' application. The navigation bar at the top includes 'Go To', 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The main heading is 'Supplemental Nutrition Assistance Program (SNAP)' with a sub-heading 'Record eligibility information about SNAP (formerly known as the food stamp program)'. Below this is a table with columns for 'Name', 'Social Security Number (SSN)', and 'Role Claimant'. A 'Benefit Leads' sidebar on the left lists various categories, with 'Benefit Lead Selection' currently active. The main form area contains several sections of questions with radio button options:

- Indicates required information**
- SNAP status**: Currently receiving SNAP benefits, Filed within the past 60 days, Never filed or file date more than 60 days in the past, Unknown
- Recertification notice received within past 30 days**: Yes, No, Unknown
- All household members applying for or receiving SSI**: Yes, No, Pre-release, Unknown
- May I take your SNAP application today?**: Yes, No, Unknown

A yellow warning box states: 'Most recent application date must be entered'. Below this is a field for 'Last SNAP application or recertification date' with a date format 'mm/00/yyyy'. Further down are sections for 'Combined Application Project (CAP) data' (Shelter cost at or above state standard) and 'Subsidized housing with heat included in rent'. At the bottom, there are sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). Navigation buttons at the bottom left include 'Next', 'Previous', and 'Save & Exit'. At the bottom center are 'Undo Changes' and 'Delete' buttons.

More Info link:

Combined Application Project (CAP): More Information ✕

The Combined Application Project (CAP) is an agreement between some states, SSA, and the Food and Nutrition Service (FNS) to test streamlined procedures for applying for SNAP through SSA. Complete this question if the state of residence is in one of the CAP states. CAP States are: Arizona, Kentucky, Louisiana, Maryland, Michigan, Mississippi, North Carolina, Pennsylvania, South Carolina, New York, South Dakota, Texas, Virginia, Florida, Massachusetts, and Washington.

Close

Shelter Cost: More Information ✕

Only for CAP States

Close

Subsidized Housing: More Information ✕

Only for Residents of New York State: Enter whether the claimant is living in subsidized housing with heat included in the rent if the claimant is eligible for CAP.

Close

3. Health Expenses and Third Party Liability

The Health Expenses and Third Party Liability page allows the user to collect data pertaining to: (Optional for a deferred claim)

- A client's eligibility for Medicaid coverage
- A client's third party insurance coverage and who is the owner of the policy.
- Information pertaining to an insurance claim or legal action that the claimant may have filed or has pending

The screenshot shows the 'Health Expenses and Third Party Liability' form within the 'SSI Claims' application. The top navigation bar includes 'Go To', 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The form title is 'Health Expenses and Third Party Liability'. It features a sidebar with a list of categories: 'Benefit Leads' (with 'Benefit Lead Selection' and 'Supplemental Nutritional Assist. Prog.' checked), 'Health Expenses/Liability' (selected), 'Title II Disability', 'Military', 'Railroad', 'Federal Government', 'State/Local Government', 'Union', 'Private Employment', and 'Foreign Country'. The main content area contains two required questions: 'Any unpaid medical expenses from 01/2021 through 03/2021' and 'Agree to assign rights to payments for medical support and medical care to the state Medicaid agency'. Both have radio button options for 'Yes', 'No', 'Automatic Assignment', and 'Unknown'. There are also expandable sections for 'Show person remarks' and 'Show file documentation notes', both currently showing 'No remarks' and 'No notes' respectively. At the bottom of the form are 'Clear Page' and 'Delete' buttons. The footer of the page contains 'Next', 'Previous', and 'Save & Exit' buttons.

4. Social Security Lead

The Social Security Lead page collects information about the claimant or his/her spouse's, former spouse's or parent's social security coverage. The information collected on this page is used to decide if the user should refer the claimant to file and pursue Title II benefits.

This screen is a read-only screen.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Social Security Lead

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Social Security**
- Title II Retirement (2)
- Retirement and Disability (5)
- Title II from Spouse (6)

Relationship to claimant
Self

Person with Social Security coverage

Potential entitlement to Social Security
No

Reason

Lead status
No entry

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

Next Previous Save & Exit

5. Disability Entitlement

The Disability Entitlement page exists in the SSI Claims System to explore potential entitlement to Disability benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

The screenshot shows the 'Disability Entitlement' page in the SSI Claims System. At the top, there is a navigation bar with tabs for 'General Identification', 'Living Arrangements', 'Resources', 'Income', 'Benefit Leads', 'Summary', and 'Claim Edits and Alerts'. The 'Benefit Leads' tab is selected. Below the navigation bar, the page title 'Disability Entitlement' is displayed. The main content area is divided into two columns. The left column contains a 'Benefit Leads' section with a list of options: 'Benefit Lead Selection' (checked), 'Supplemental Nutritional Assist. Prog.' (checked), 'Health Expenses/Liability' (checked), and 'Title II Disability' (unchecked). Under 'Title II Disability', there are several sub-options: 'Military', 'Railroad', 'Federal Government', 'State/Local Government', 'Union', 'Private Employment', and 'Foreign Country'. The right column contains a form with a red asterisk indicating required information. The form has a section for 'Potential entitlement on' with a radio button for 'Yes' and a radio button for 'No'. Below this, there are two expandable sections: 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). At the bottom of the form, there is a 'Clear Page' button. At the bottom of the page, there are three buttons: 'Next', 'Previous', and 'Save & Exit'.

Dropdown list:

Reason not entitled

The screenshot shows a dropdown list with a blue header bar. The list contains four options: 'Never worked', 'No work since prior denial', 'Refused to file', and 'None apply'.

6. Child's Entitlement from Parents

The Child's Entitlement from Parents page exists in SSI Claims system to explore the claimant's potential entitlement to auxiliary or survivor benefits from the claimant's parents. All previous MSSICS screens of Child's Entitlement from Father and Child's Entitlement from Mother will be converted to Child's Entitlement from Parents.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Child's Entitlement from Parents

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Title II from Parents**
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

* Indicates required information

Potential entitlement on

*Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month

Yes No

*Reason not entitled

—

▼ Show person remarks
No remarks

▼ Show file documentation notes
No notes

Clear Page

Next Previous Save & Exit

Dropdown list:

—

Claimant married to a non RSDI beneficiary

Parent neither deceased nor entitled

Refused to file

None apply

7. Retirement Entitlement

The Retirement Entitlement page exists in the Supplemental Security Income (SSI) application to explore potential entitlement to Retirement benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

The screenshot shows the 'Retirement Entitlement' page within the 'SSI Claims' application. The top navigation bar includes 'Go To' and several status indicators: General Identification, Living Arrangements, Resources, Income, Benefit Leads (active), Summary, and Claim Edits and Alerts. The page title is 'Retirement Entitlement'. Below the title is a table with columns for Name, Social Security Number (SSN), and Role (Claimant). A sidebar on the left lists 'Benefit Leads' with options: Benefit Lead Selection (checked), Supplemental Nutritional Assist. Prog., Health Expenses/Liability, Social Security, Title II Retirement (2), Retirement and Disability (5), and Title II from Spouse (6). The main content area contains a 'Potential entitlement on' section with a radio button for 'No' selected. Below this is a 'Reason not entitled' dropdown menu. There are also sections for 'Show person remarks' (No remarks) and 'Show file documentation notes' (No notes). At the bottom left are 'Next', 'Previous', and 'Save & Exit' buttons. At the bottom center is a 'Clear Page' button.

Dropdown list:

The screenshot shows a dropdown list with a blue header bar. The list contains four options: 'Never worked', 'No work since prior denial', 'Refused to file', and 'None apply'.

8. Retirement and Disability Entitlement

The Retirement and Disability Entitlement page exists in the SSI Claims System to explore potential entitlement to Retirement and Disability benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant and claimant spouse has pursued potential entitlement to these benefits. When a new event occurs (initial claim or redetermination) the user will be presented with Retirement entitlement and/or Disability entitlement pages in the path.

The screenshot shows the 'Retirement and Disability Entitlement' page in the SSI Claims System. The breadcrumb trail includes: Home, Go To, General Identification, Living Arrangements, Resources, Income, Benefit Leads, Summary, and Claim Edits and Alerts. The page title is 'Retirement and Disability Entitlement'. Below the title is a table with columns for Name, Social Security Number (SSN), and Role (Claimant). The main content area is divided into two sections. On the left is a 'Benefit Leads' sidebar with radio buttons for: Benefit Lead Selection (checked), Supplemental Nutritional Assist. Prog., Health Expenses/Liability, Retirement and Disability (checked), Military, Railroad, Federal Government, State/Local Government, Union, Private Employment, and Foreign Country. On the right is a form with the following sections: 'Indicates required information' with a sub-section 'Potential entitlement on'; 'Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month' with radio buttons for Yes and No (No is selected); 'Reason not entitled' with a dropdown menu showing '--'; 'Show person remarks' with the text 'No remarks'; and 'Show file documentation notes' with the text 'No notes'. At the bottom of the form is an 'Undo Changes' button. At the bottom of the page are three buttons: Next, Previous, and Save & Exit.

Dropdown list:

The screenshot shows a dropdown list with the following options: Never worked, No work since prior denial, Refused to file, and None apply.

9. Spouse or Surviving Spouse Entitlement

The Spouse or Surviving Spouse Entitlement page exists in the SSI Claims System to explore potential entitlement to spouse, widow, or widower's benefits. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits. The information displayed on this page is derived from the data added to the claims file through the Marriage Information section of the Marriage page when certain criteria is met.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | Benefit Leads | Summary | Claim Edits and Alerts

Spouse or Surviving Spouse Entitlement

Name	Social Security Number (SSN)	Role Claimant
------	------------------------------	------------------

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Social Security
- Title II Retirement (2)
- Retirement and Disability (5)
- Title II from Spouse (6)

Potential entitlement on

Already entitled to maximum benefits at the earliest month or entitled to higher benefits on another record at the earliest month

Yes No

Reason not entitled

--

Show person remarks

No remarks

Show file documentation notes

No notes

Clear Page

Next Previous Save & Exit

Dropdown list:

--

- Age requirement for claimant not met and no child of number holder in care
- Duration of marriage not met
- Spouse or divorced spouse not insured
- Spouse insured but not entitled
- Remarried prior to age 60 and not disabled
- Not disabled within 7 years (84 months) of spouse's death
- Not disabled within 7 years (84 months) of loss of parent's benefit
- Not disabled within 7 years (84 months) of disability cessation for Disabled Widow's Benefit
- Not eligible for independently divorced spouse benefits
- Refused to file
- None apply

10. Military Service

The Military Service page exists in the SSI Claims System to collect data on the military service of the claimant, spouse, former spouse or parent. The information is used to determine the claimant's potential eligibility for a military pension or Veterans Affairs (VA) benefits by generating a referral letter directing the claimant to pursue such potential entitlements.

SSI Claims

[Home](#)
[Go To](#)
[General Identification](#)
[Living Arrangements](#)
[Resources](#)
[Income](#)
[Benefit Leads](#)
[Summary](#)
[Claim Edits and Alerts](#)

Military Service

Name	Social Security Number (SSN)	Role	Claimant

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military**
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

* Indicates required information

Person with the military service [Check DRAMS/VBAQ](#)

Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	Select

Name

* First Middle * Last Suffix Unknown

SSN

Relationship

Service number

Claim status for military service benefits

Lead status

Diary Type **Diary date**
mm/dd/yyyy

VA or Dept. of Defense contact information

Select from favorites or type contact information

[Show favorites](#)

Contact

Address

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Phone

Web address

Military Service

Branch of Service	Period or Length of Service	Actions
<input type="text"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Add Another](#)
[Clear Page](#)
[Delete](#)

[Next](#)
[Previous](#)
[Save & Exit](#)

Dropdown list:

Relationship

Self
Spouse
Former Spouse
Parent
Child
Unknown

Claim status for military service benefits

Never filed
Pending
Approved
Denied

Lead status

Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

Diary Type

FC - VA Compensation
FE - VA Pension
FL - Department of Defense

11. Railroad Employment

The Railroad Employment page exists in the SSI Claims system to explore potential entitlement to Railroad benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

SSI Claims

Go To | General Identification | Living Arrangements | Resources | Income | **Benefit Leads** | Summary | Claim Edits and Alerts

Railroad Employment

Name | Social Security Number (SSN) | Role
Claimant

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
 - Federal Government
 - State/Local Government
 - Union
 - Private Employment
 - Foreign Country

* Indicates required information

Railroad employee
Select a person from the person list to populate information OR type in form fields below.

[^ Hide person list](#)

Name	SSN	Relationship	Actions
		Self	Select

*** Name**

First
 Middle
 Last
 Suffix
 Unknown

SSN

*** Relationship**

--

Employment was less than 5 years

Claim status for railroad employment benefits

--

*** Lead status**

--

Diary date

mm/dd/yyyy

Railroad contact information
Select from favorites or type contact information

[^ Show favorites](#)

Contact
Railroad Retirement Board

Address

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Phone

Web address

Employer

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	Delete

[^ Show person remarks](#)
No remarks

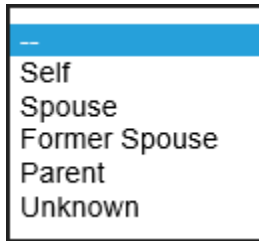
[^ Show file documentation notes](#)
No notes

[Add Another](#)
 [Clear Page](#)
 [Delete](#)

[Next](#)
 [Previous](#)
 [Save & Exit](#)

Dropdown list

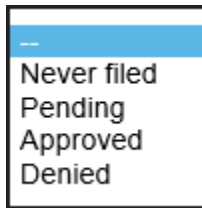
Relationship



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Self, Spouse, Former Spouse, Parent, and Unknown.

- Self
- Spouse
- Former Spouse
- Parent
- Unknown

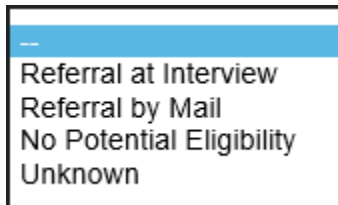
Claim status for military service benefits



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Never filed, Pending, Approved, and Denied.

- Never filed
- Pending
- Approved
- Denied

Lead status



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

- Referral at Interview
- Referral by Mail
- No Potential Eligibility
- Unknown

12. Federal Employment

The Federal Employment page exists in the SSI Claims System to collect data about the claimant's or someone else's (i.e., spouse, former spouse or parent's) work for the federal government. The information is used to assess the claimant's potential eligibility for other benefits by generating a referral letter directing the claimant to pursue potential entitlement to federal employment benefits.

SSI Claims
Home | Go To | General Identification | Living Arrangements | Resources | Income | **Benefit Leads** | Summary | Claim Edits and Alerts

Federal Employment

Name	Social Security Number (SSN)	Role	Claimant

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government**
- State/Local Government
- Union
- Private Employment
- Foreign Country

Indicates required information

Federal employee
Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	Select

Name

* First Middle * Last Suffix Unknown

SSN

* Relationship

Employment was less than 5 years

Withdrew contribution from pension plan and not entitled to annuity

Claim status for federal employment benefits

* Lead status

Diary date
mm/dd/yyyy

Federal government contact information
Select from favorites or type contact information

[Show favorites](#)

Contact
Office of Personnel Management

Address
Street 1 Street 2 Street 3 Street 4
City/Town State/Territory ZIP Code

Phone

Web address

Employer

Name of Employer	Period of Employment	Actions
		Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list

Relationship

—
Self
Spouse
Former Spouse
Parent
Unknown

Claim status for military service benefits

—
Never filed
Pending
Approved
Denied

Lead status

—
Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

13. State or Local Government

The State or Local Employment page exists in the SSI Claims System to explore potential entitlement to State or Local benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

State or Local Government

Name Social Security Number (SSN) Role
Claimant

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

State or local government employee
Select a person from the person list to populate information OR type in form fields below.

[^ Hide person list](#)

Name	SSN	Relationship	Actions
		Self	Select

*** Name**

* First Middle * Last Suffix Unknown

SSN

*** Relationship**

--

Claim status for state or local government benefits

--

*** Lead status**

--

Diary date

mm/dd/yyyy

State or local government contact information
Select from favorites or type contact information

[^ Show favorites](#)

Contact

Address

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Phone

Web address

Employer

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	Delete

^ Show person remarks
No remarks

^ Show file documentation notes
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list

Relationship

—
Self
Spouse
Former Spouse
Parent
Unknown

Claim status for state or local government benefits

—
Never filed
Pending
Approved
Denied

Lead status

—
Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

14. Union Membership

The Union Membership page exists in the SSI Claims System to explore potential entitlement to Union Membership benefits for the claimant and claimant spouse. The information collected on this page is used to determine what, if any, action needs to be taken in order to ensure that the claimant has pursued potential entitlement to these benefits.

SSI Claims
Go To
General Identification
Living Arrangements
Resources
Income
Benefit Leads
Summary
Claim Edits and Alerts

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

Union Membership

Name	Social Security Number (SSN)	Role	Claimant

* Indicates required information

Union member
Select a person from the person list to populate information OR type in form fields below.

[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	Select

Name

* First Middle * Last Suffix Unknown

SSN

* Relationship

Claim status for union benefits

* Lead status

Diary date
mm/dd/yyyy

Union contact information
Select from favorites or type contact information

[Show favorites](#)

Contact

Address

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Phone

Web address

Employer

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

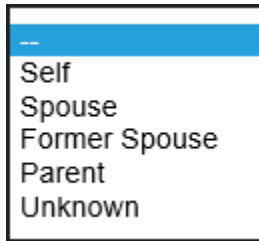
[Show file documentation notes](#)
No notes

[Add Another](#)
[Clear Page](#)
[Delete](#)

Next
Previous
Save & Exit

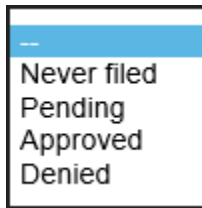
Dropdown list

Relationship



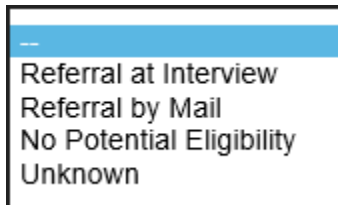
A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Self, Spouse, Former Spouse, Parent, and Unknown.

Claim status for union benefits



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Never filed, Pending, Approved, and Denied.

Lead status



A dropdown menu with a blue header bar containing a small white arrow pointing left. Below the header, the following options are listed in black text: Referral at Interview, Referral by Mail, No Potential Eligibility, and Unknown.

15. Private Employment

The Private Employment page exists in the SSI Claims System to collect data about the work history of the claimant, spouse, former spouse or parent. The information is used to determine eligibility for a pension plan from private employment by generating a referral letter directing the claimant to pursue potential entitlements.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Private Employment

Name Social Security Number (SSN) Role Claimant

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

Employee
Select a person from the person list to populate information OR type in form fields below.

Name	SSN	Relationship	Actions
		Self	Select

Name

* First Middle * Last Suffix Unknown

SSN

Relationship

--

Age 24 or younger during all periods of employment

Claim status for private employment benefits

--

Lead status

--

Diary date

mm/dd/yyyy

Employer contact information
Select from favorites or type contact information

[Show favorites](#)

Contact

Address

Country

United States or U.S. Territory

Street 1 Street 2 Street 3 Street 4

City/Town State/Territory ZIP Code

Phone

U.S. International

10-digit Number

Web address

Employer

Name of Employer	Period of Employment	Actions
<input type="text"/>	<input type="text"/>	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

[Add Another](#) [Clear Page](#) [Delete](#)

[Next](#) [Previous](#) [Save & Exit](#)

Dropdown list

Relationship

—
Self
Spouse
Former Spouse
Parent
Unknown

Claim status for private employment benefits

—
Never filed
Pending
Approved
Denied

Lead status

—
Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

16. Foreign Benefits

The Foreign Employment page exists in the SSI Claims system. This page collects data about the claimant's or someone else's (i.e., spouse, former spouse or parent's) work under a foreign government social security or pension plan. This information is used to assess the claimant's potential eligibility for other benefits by generating a referral letter directing the claimant to pursue potential entitlement to foreign employment benefits.

SSI Claims

Go To: General Identification, Living Arrangements, Resources, Income, **Benefit Leads**, Summary, Claim Edits and Alerts

Foreign Benefits

Name: Social Security Number (SSN): Role: Claimant

Benefit Leads

- Benefit Lead Selection
- Supplemental Nutritional Assist. Prog.
- Health Expenses/Liability
- Title II Disability
- Military
- Railroad
- Federal Government
- State/Local Government
- Union
- Private Employment
- Foreign Country

Include potential eligibility for foreign benefits based on citizenship, residency or work covered under a foreign country with a social security program

* Indicates required information

Person name
Select a person from the person list to populate information OR type in form fields below.
[Hide person list](#)

Name	SSN	Relationship	Actions
		Self	Select

* Name

* First: [] Middle: [] * Last: [] Suffix: [] [Unknown]

SSN: []

* Relationship: []

Claim status for foreign benefits: []

* Lead status: []

Diary date: []
mm/dd/yyyy

Foreign benefit contact information
Select from favorites or type contact information
[Show favorites](#)

Contact: []

Address
Country: United States or U.S. Territory []

Street 1: [] Street 2: [] Street 3: [] Street 4: []

City/Town: [] State/Territory: [] ZIP Code: []

Phone
 U.S. International
10-digit Number: []

Web address: []

Period of Employment, residency or citizenship

Period	Country	Actions
[]	[]	Delete

[Show person remarks](#)
No remarks

[Show file documentation notes](#)
No notes

Add Another Clear Page Delete

Next Previous Save & Print

Dropdown list

Relationship

—
Self
Spouse
Former Spouse
Parent
Unknown

Claim status for foreign benefits

—
Never filed
Pending
Approved
Denied

Lead status

—
Referral at Interview
Referral by Mail
No Potential Eligibility
Unknown

G. Summary

1. Living Arrangements Summary

Living Arrangements Summary is an optional page that provides a summary of the Living Arrangements data that have been collected in the detailed Living Arrangements pages for a Supplemental Security Income claimant and claimant spouse, if applicable.

All fields on the Living Arrangements Summary page are display only.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Living Arrangements Summary

Name	Social Security Number (SSN)	Role Claimant

Summary

- Living Arrangements Summary
- Resources Summary
- Income Summary

Save & Exit

Effective Date	Federal Living Arrangement	Ineligibility Reason	State and County Code	Optional State Supplement Code	Intervening A or C Period	Chose Presumed Maximum Value (PMV)	Cash from Household	Actual ISM

2. Resources Summary

Resources Summary is an optional page that provides a condensed display of the resource data that has been collected in the detailed resource data groups for a Supplemental Security Income (SSI) claimant or deemor. In addition, the person's countable resources are totaled in Resources Summary to aid Claims Representative's in their review of the claim or in performing manual resource deeming computations. Resources Summary is entirely propagated or derived and no data can be changed on this data group.

All fields on the Resources Summary page are display only.

SSI Claims

Go To ▾ General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Resources Summary

Name Social Security Number (SSN) Role Claimant

Summary

- Living Arrangements Summary
- Resources Summary**
- Income Summary

Save & Exit

Expand all

Expand	Period	Page Name	Description	Monthly Countable Total (\$)
<input checked="" type="radio"/>				

3. Income Summary

Income Summary (ISUM) is an optional, display-only page. It displays limited information about a person's countable income for the past 26 months, the current month, and the future 14 months. The information displayed is from the person's detailed income records.

All fields on the Income Summary page are display only.

SSI Claims

Go To General Identification Living Arrangements Resources Income Benefit Leads Summary Claim Edits and Alerts

Income Summary

Name	Social Security Number (SSN)	Role Claimant
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Summary

Living Arrangements Summary

Resources Summary

Income Summary

Save & Exit

Other Income

Cash

Start Date	End Date	Countable Amount (\$)
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