Appendix J- OMB 0584-0299 SNAP- QC System's electronic version of the FNS 380-1

U.S. Department of Agriculture - Food and Nutrition Service

QUALITY CONTROL REVIEW SCHEDULE

This information is being collected to assist the Food and Nutrition with the Supplemental Nutrition Assistance Program's Quality Control Reviews. This is a mandatory collection and FNS uses the information for program monitoring, evaluation, corrective action, and characteristics. This collection does request personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0299. The time required to complete this information collection is estimated to average 1.056 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-0299). Do not return the completed form to this address. PRIVACY ACT NOTICE: This report is required under provisions of 7 CFR 275.24 (SNAP). This information is needed for the review of State performance in determining recipient eligibility. The information is used to determine State compliance, and failure to report may result in a finding of non-compliance.



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I. QC Review Num	ber 2. Ca	se Number		3. State	4. Local Agency	5. Sample Mon	th and Year	6. S	tratum	
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7. Disposition	8. Review Finding	9. SNAP Allotme	ent Under Review		10. Error Amount			11.Case Clas	sification	
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Section 2 - Detailed Error Findings										
12. Element	13. Nature Codes	14. Cause	15. Error Finding	6. Error Amount	17. Discovery	18. Verification	19a Occurrence Date (Month)	19a Occurrence Date (Year)	19b Occurrence (Time Period)	
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20. Most Recent (MM/DD/YYYY)		21.	Type of Action	22. Length of Certificat # of months	ion Period	23. Allotment Adjustment	24. Amount of Allotment Adjustment
25. Number of Household Meml	bers		Receipt of edited Service	27. Authorized Repress Used at Certification	entative	28. Categorical Eligibility	29. Reporting Requirement
Resources:)	1		
30. Liquid Assets		31. Real Property (Excluding Home)	32 a Stat	a. Ist Vehicle 32 b. 2nd Ve tus Status	hicle 33. Cou	untable Vehicle Assets	34. Other Non-Liquid Assets
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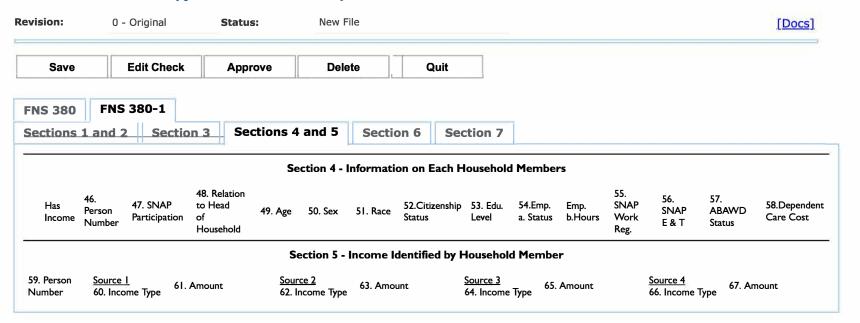
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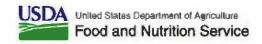
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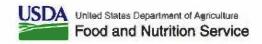
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68. Timeliness of Appl. Processing (Expedited and 30 Day Requirement)	69. QC Interview	70. Timeliness of Recertification	71. Allotment Test	72.	73.	74.	75.	76.	- 5	



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