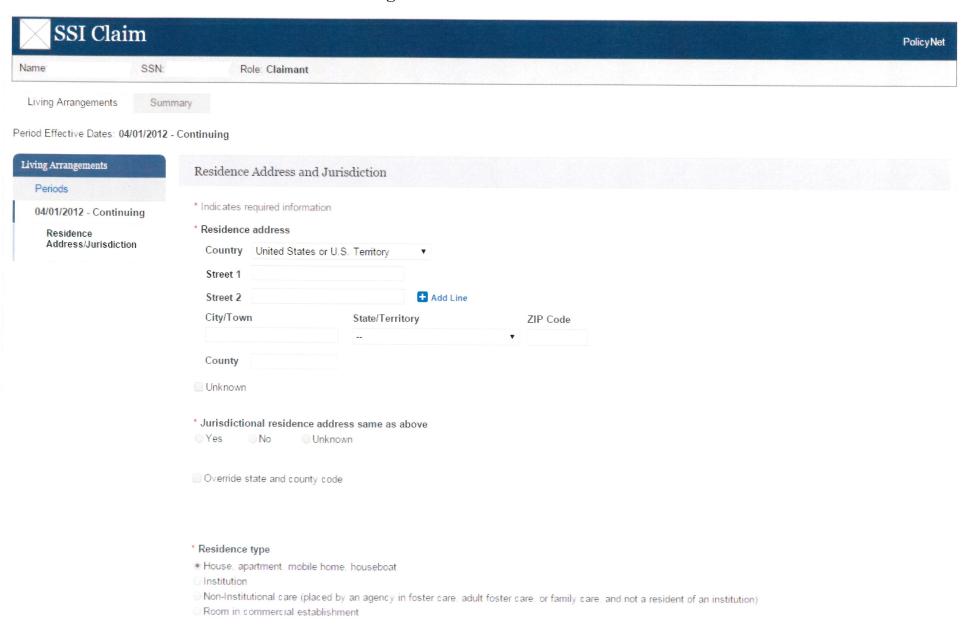
SSI CLAIM SYSTEM PAGE PRINTS FOR

OMB # 0960-0174

SSA-8006-F4

The following are screen prints from the SSI claim system that collect information that is equivalent to the paper form SSA-8006-F4. Like the SSA-8006-F4, these SSI claim system pages collect information that we need to establish whether the SSI recipient lives in his or her own household or lives in another person's household. Like the SSA-8006-F4, these pages also collect information that we need to determine if the SSI recipient receives in-kind support and maintenance from inside the household, from outside the household, or does not receive any in-kind support and maintenance.

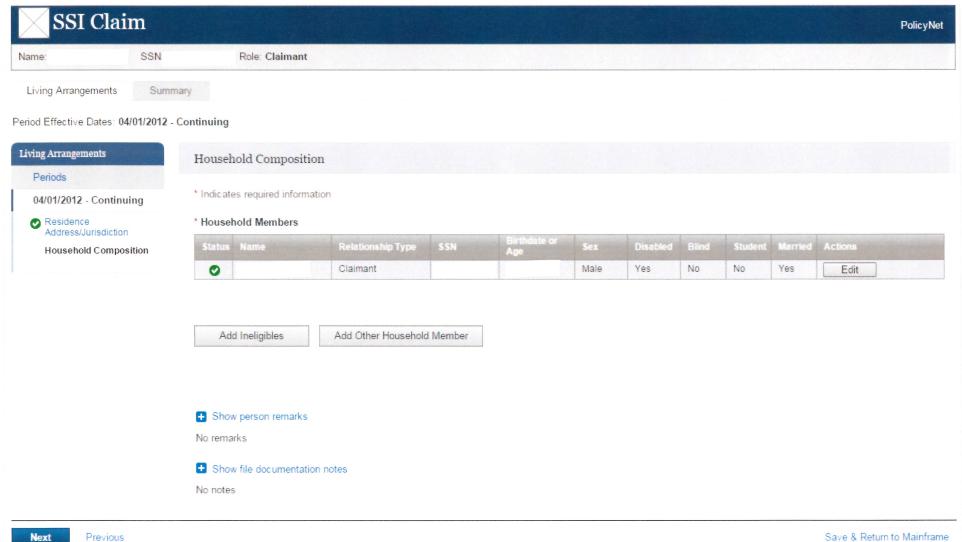
1. Residence Address and Jurisdiction Page



* Residence start date		Unknown	
	mm/dd/yyyy		
Intended first of mont	h residence		
Show person remarks	S		
No remarks			
Show file documenta	tion notes		
No notes			

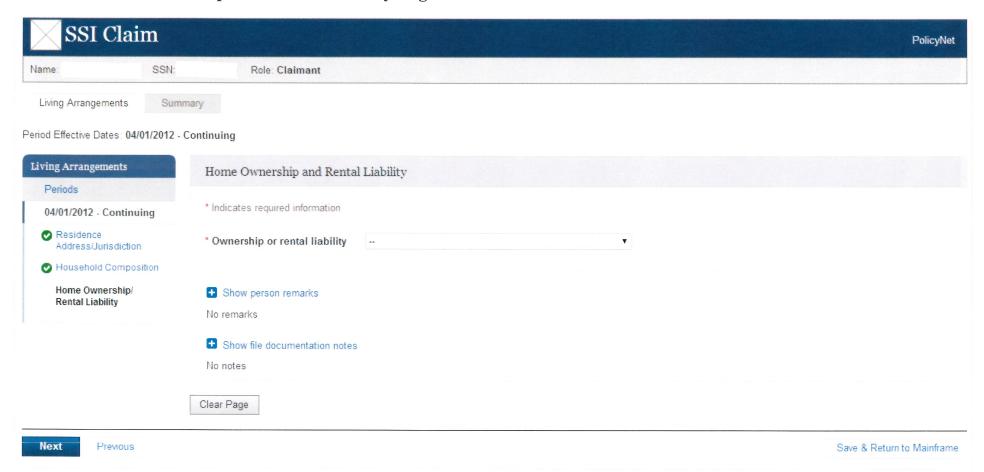
Next Previous Save & Return to Mainframe

2. Household Composition Page

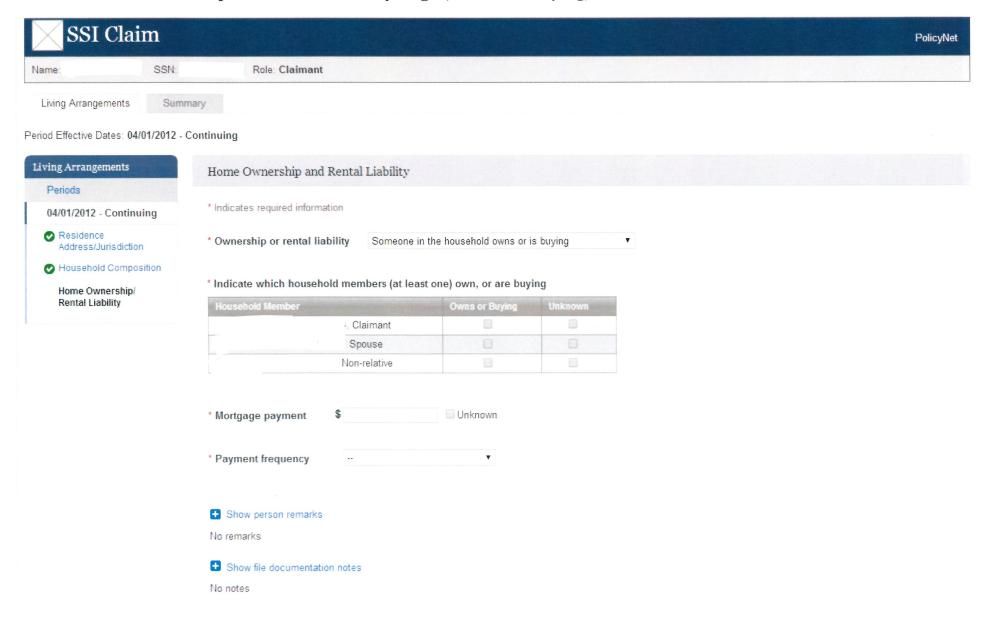


Previous Save & Return to Mainframe

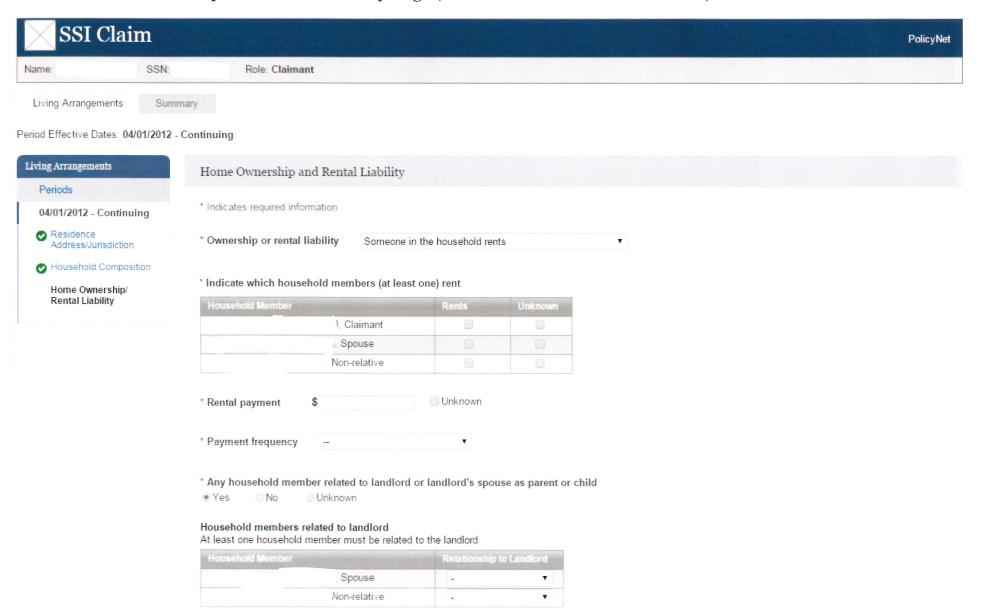
3. Home Ownership and Rental Liability Page



4. Home Ownership and Rental Liability Page (Own or is buying)



5. Home Ownership and Rental Liability Page (Rents - Related to landlord - Yes)



* Rental liability verified					
Yes		4 004 705)	- Oah		
* Verification method Oth	er (e.g. Person Statemer	nt or SSA - 795)	▼ Othe	er	
* Current market rental value	\$	Unknown			
* Market rental value verified • Yes • No • Decide	later				
* Verification method			•		
Rental subsidy \$ 0.00					
* Landlord name		Unknown			
* Landlord address					
Country United States or U.S	S. Territory ▼				
Street 1					
Street 2	+ Add	Line			
City/Town	State/Territory		ZIP Code		
		•			
Unknown					
Landlord phone ● U.S. □ International					
10-digit Number					
Show person remarks					
No remarks					
Show file documentation note	s				
No notes					

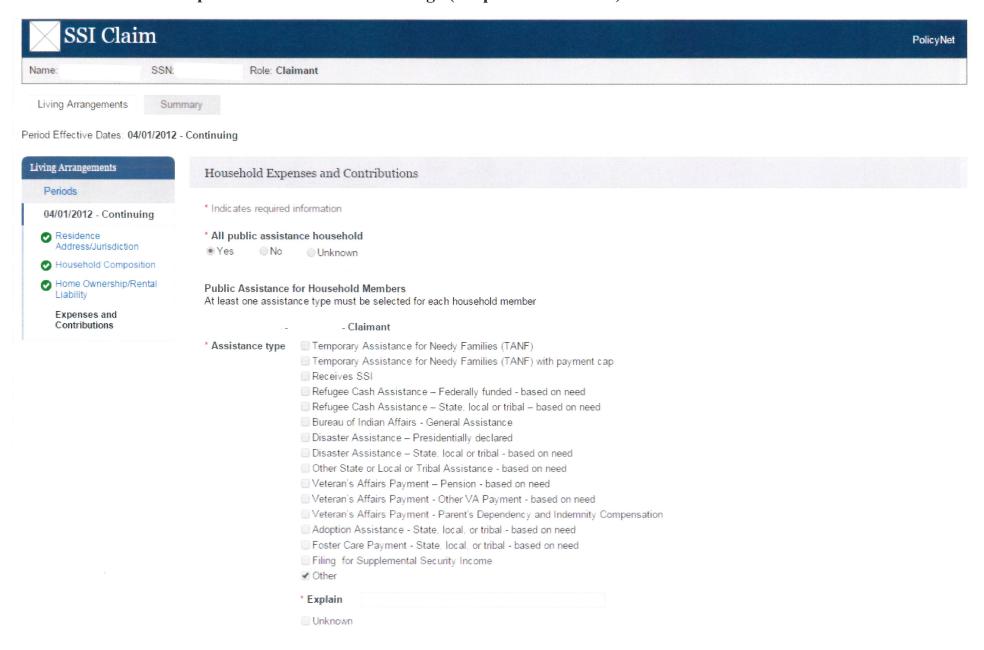
Clear Page

Next

Previous

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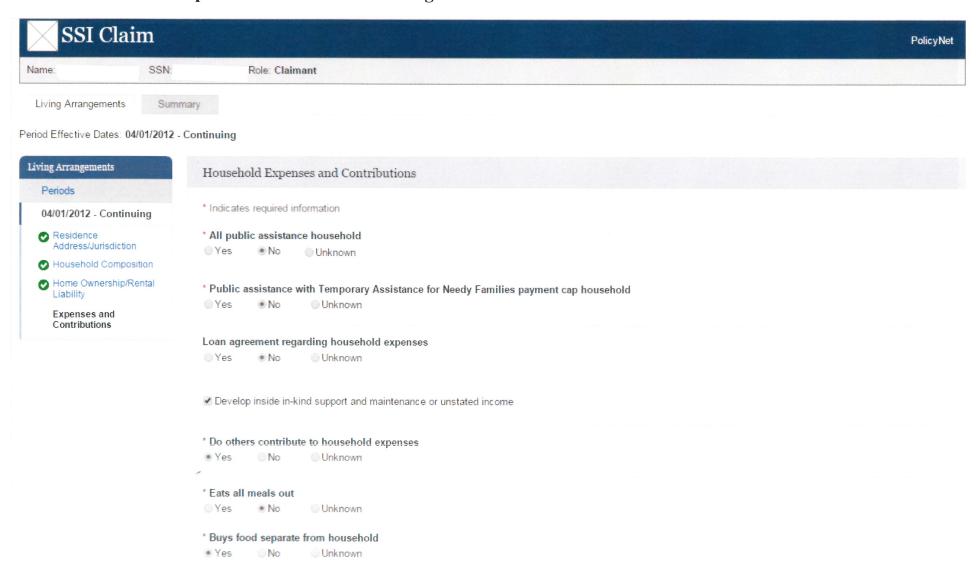
6. Household Expenses and Contributions Page (All public assistance)



* Public assistance Yes No	verifed	
-	Spouse	
* Assistance type	Temporary Assistance for Needy Families (TANF) Temporary Assistance for Needy Families (TANF) with payment cap Receives SSI Refugee Cash Assistance – Federally funded - based on need Refugee Cash Assistance – State, local or tribal – based on need Bureau of Indian Affairs - General Assistance Disaster Assistance – Presidentially declared Disaster Assistance – State, local or tribal - based on need Other State or Local or Tribal Assistance - based on need Veteran's Affairs Payment – Pension - based on need Veteran's Affairs Payment - Other VA Payment - based on need Veteran's Affairs Payment - Parent's Dependency and Indemnity Compensati Adoption Assistance - State, local, or tribal - based on need Foster Care Payment - State, local, or tribal - based on need Filing for Supplemental Security Income Other * Explain	ensation
	Unknown	
* Public assistance Yes No	verifed	
Show person re	narks	
No remarks		
Show file documents Show f	entation notes	

Next Previous Save & Return to Mainframe

7. Household Expenses and Contributions Page



Date from		Unknown	* Date t	to	Unknown				
	mm/yyyy			mm/yyyy					
Amount oth	ners contribute		Unknown	* Claiman	t's contribution	□ Ur	nknown		
Expense ave	rage period								
Date from		Unknown	* Date t	to	Unknown				
	mm/yyyy			mm/yyyy					
Monthly experience	enses Labove, collect t	he following e	vnenses						
		-	10000						
* Food	Mortgage or Rent	* Property Insurance		* Heating * E	lectricity Gas	* Garbage Removal	* Water	* Sewer	Unknow
* Food Fotal monthly Pro rata share	* Mortgage or Rent	* Property	* Property	Fuel -	lectricity Gas	* Garbage Removal	* Water	* Sewer	Unknow
Total monthly	* Mortgage or Rent expenses e for	* Property Insurance	* Property Taxes	Fuel -	lectricity Gas	* Garbage Removal	* Water	* Sewer	
Fotal monthly Pro rata share	* Mortgage or Rent expenses e for	* Property Insurance	* Property Taxes	at \$ 0.00	Deemor Excess Contribution	* Garbage Removal	* Water	* Sewer	
Fotal monthly Pro rata share Deemor Con	* Mortgage or Rent expenses e for	* Property Insurance	* Property Taxes	at \$ 0.00	Deemor Excess	Removal Claimant's Share of		Sewer	
Fotal monthly Pro rata share Deemor Con	* Mortgage or Rent expenses e for tribution	* Property Insurance	* Property Taxes	at \$ 0.00	Deemor Excess	Removal Claimant's Share of	Unknown	Sewer	
Fotal monthly Pro rata share Deemor Con	Mortgage or Rent expenses e for tribution	* Property Insurance	* Property Taxes	t \$ 0.00	Deemor Excess	Removal Claimant's Share of	Unknown	Sewer	
Fotal monthly Pro rata share Deemor Con Deemor	Mortgage or Rent expenses e for tribution	Property Insurance \$ 0.00	• Property Taxes	t \$ 0.00	Deemor Excess Contribution	Removal Claimant's Share of	Unknown	Sewer	
Fotal monthly Pro rata share Deemor Con Deemor	* Mortgage or Rent expenses e for tribution	Property Insurance \$ 0.00	• Property Taxes	t \$ 0.00	Deemor Excess Contribution	Removal Claimant's Share of	Unknown	Sewer	

♣ Show person remarks

No remarks

Show file documentation notes

No notes

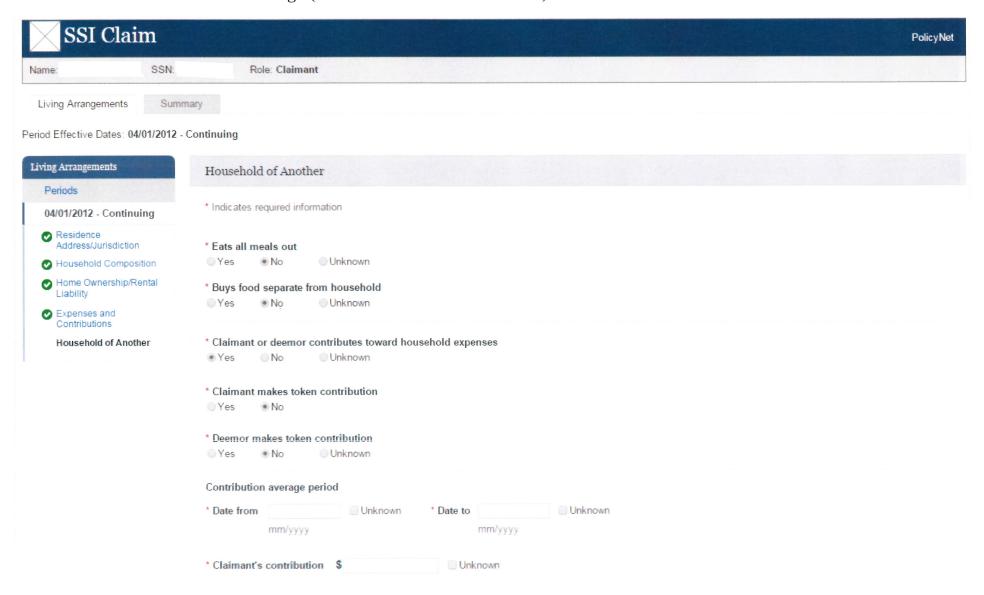
Clear Page

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8. Household of Another Page (Food and shelter earmarked)



D										
* Date from		Unknow	* Date	to		Unknown				
	mm/yyyy			mm/yyy	У					
Monthly Exp										
For the perior	d above, collect				1					
Food	Mortgage or Rent	* Property Insurance	* Property Taxes	Heating Fuel	* Electric	ity Gas	* Garbage Removal	* Water	* Sewer	Unknown
										0
Total monthly	y expenses			\$	0.00					
Pro rata shar	re for	, -	- Claima	nt \$	0.00					
Deemor Cor	ntribution									
Deemor				* Deen Contrit Amoun	oution Ex	eemor ccess ontribution	Claimant's Share of Excess	* Earmarke	d For	Unknow
		- Claimant Sp	ouse					-	,	
* Contribution	on and expense		eceived	\$	0.00					
* Contribution			received	\$	0.00					
* Contribution	on and expense		eceived	s	0.00					
* Contribution * Yes	on and expense ○ No son	verification i	received	\$	0.00					
* Contribution * Yes Contact pers Contact pho	on and expense No son	verification i	received Food and		0.00					
* Contribution * Yes Contact persections Contact pho	on and expense No No ne 10-digit l	verification i								

Pro rata food share for - Claimant \$ 0.00
Pro rata shelter share for - Claimant \$ 0.00

Total ISM from household for - Claimant \$ 0.00

* Earmarked contribution verified Yes No

Show person remarks
No remarks

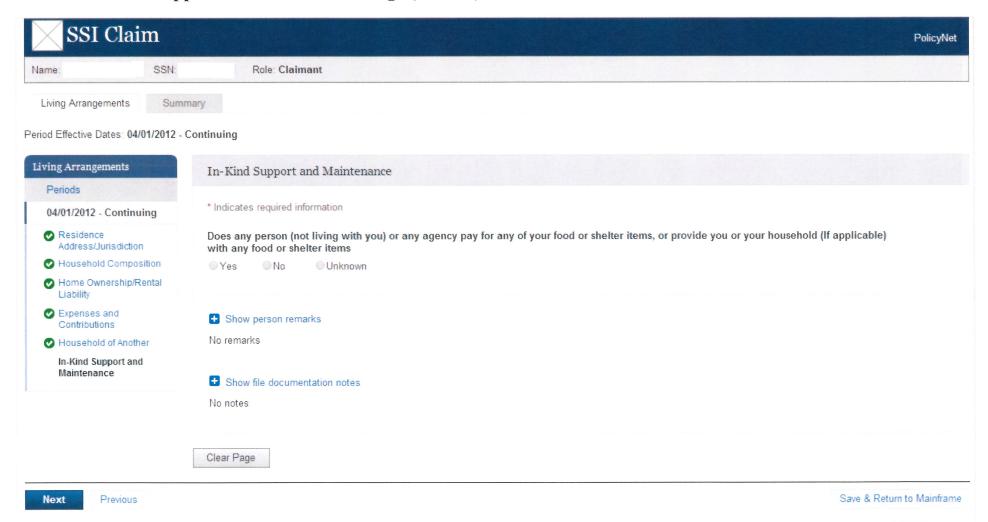
Show file documentation notes
No notes

Next

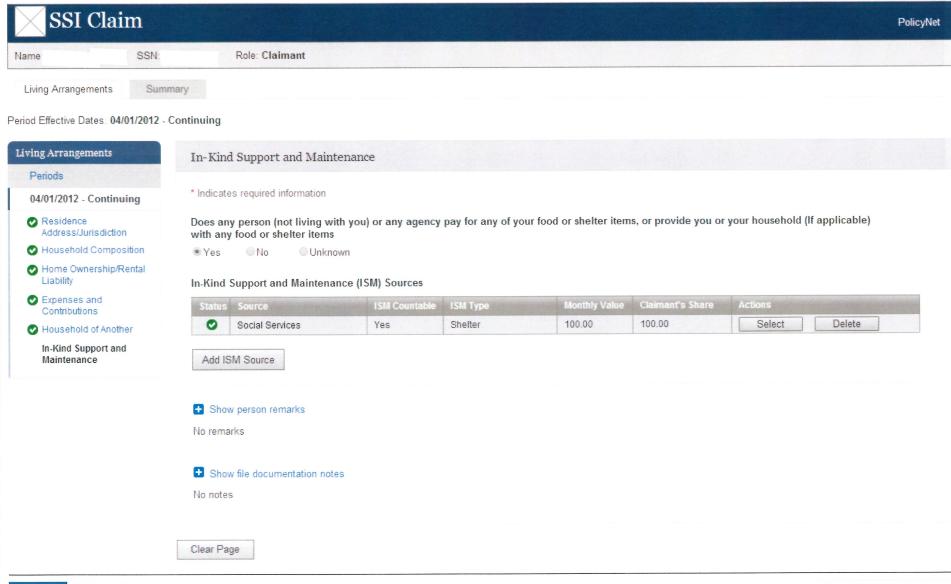
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9. In-kind Support and Maintenance Page (Default)



10.In-Kind Support and Maintence Page (ISM – yes)

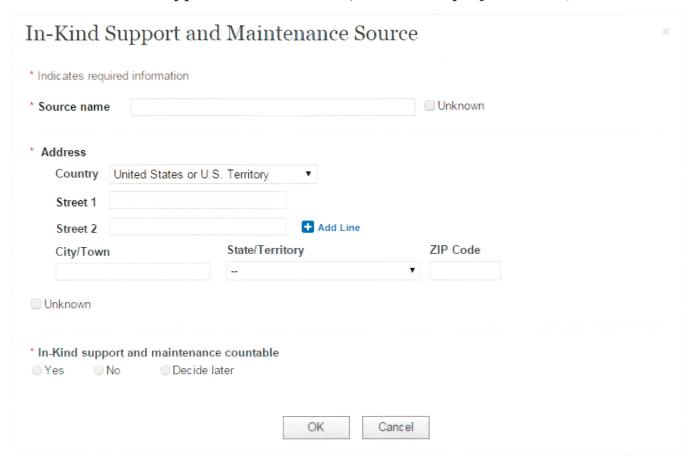


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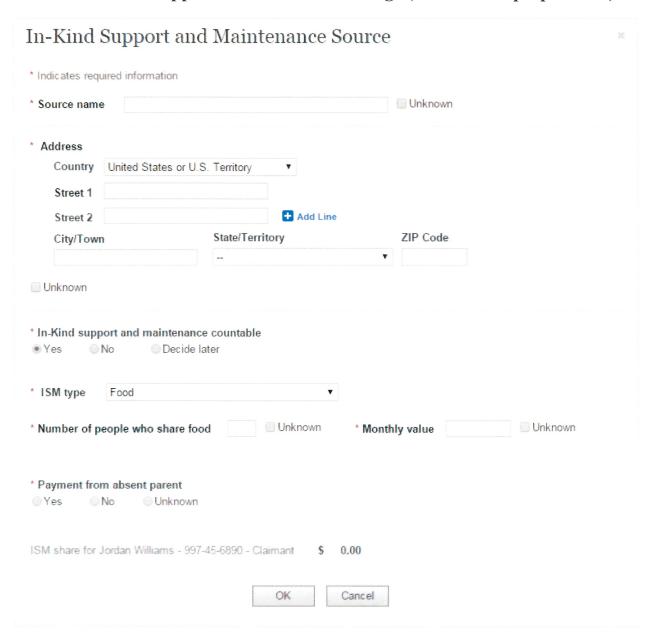
Previous

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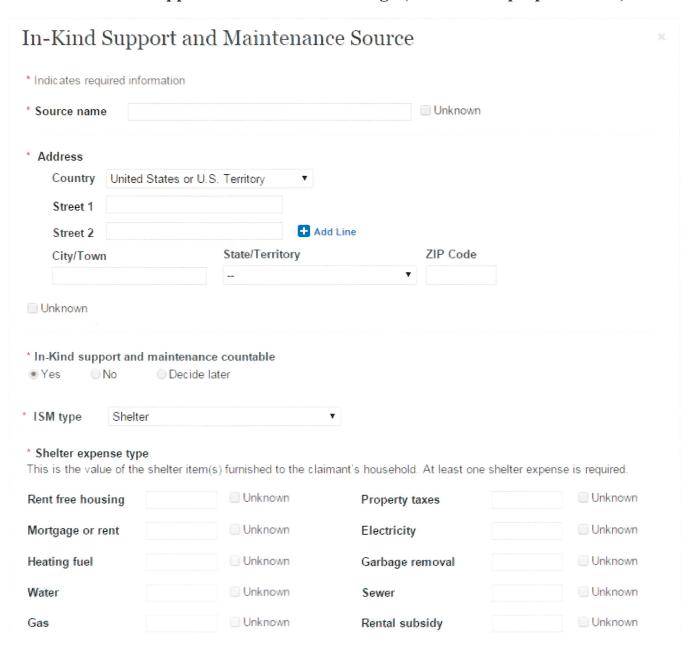
11.In-Kind Support and Maintence (Add ISM Pop-up – Default)



12.In-kind Support and Maintenance Page (Add ISM Pop-up – Food)

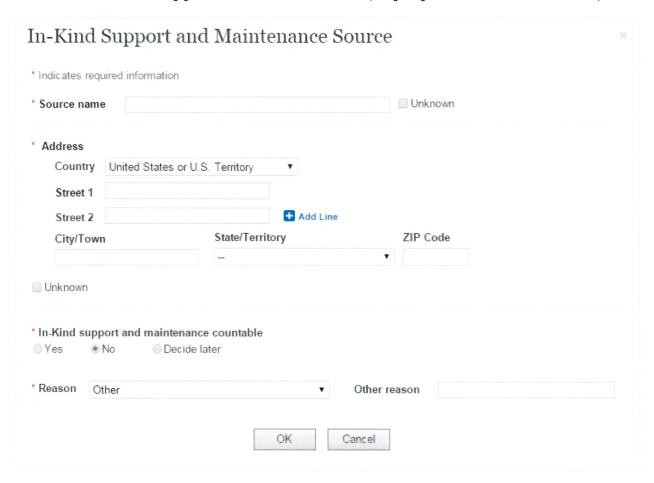


13.In-kind Support and Maintenance Page (Add ISM Pop-up – Shelter)

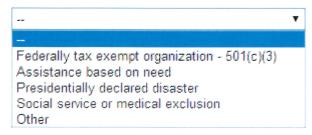


Property insurance	Unknown	Multiple shelter items	Unknown
Total expenses	\$ 0.00		
* Payment from abs			
ISM share for Jordan	Williams - 997-45-6890 - Claimant	\$ 0.00	
	OK	Cancel	

14.In-kind Support and Maintenance (Pop-up – ISM not countable)



Reason Dropdown



15.In-Kind Support and Maintenance (Add ISM Pop-Up – Transient)

