FS SEPARATE DETERMINATION SCREEN	PA CASE NO.		FS CASE TYPE		FS CASE NUMBER	FISC. DIST.
	AUTH. NO.		TRANSACTION TYPE			

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FS SEPARATE DETERMINATION INPUT FORM

CASE NAME							OFFICE CODE	UNIT ID	WORKER ID	CO-OP CASE NOS.	
REASON CODE		NOTICE IND.		NOTICE NUMBER		LAN CODE		TRANS			
FS AUTH. PERIOD	FROM		TO		REP CODE	TOP	SP CD		RESP FOR CASE		
RESIDENCE ADDRESS											
CITY/ TOWN		ST		ZIP CODE		PHO. NO.					
CARE OF											
MAILING ADDRESS											
CITY/ TOWN		ST		ZIP CODE							

1

LOCAL DATA			
15	16	17	18

LINE NO.	REL	EMPL CODE	FS INDIV	IND. STAT	FS INDIVIDUAL EFFECTIVE DATE	CARD CODE	EBICS
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

3 5

ANTICIPATED FUTURE ACTION										
LINE NO.	CODE	MO	DAY	YR	LINE NO.	CODE	MO	DAY	YR
1					4				
2					5				
3					6				

4

LINE NO.	C D	OTHER NAMES		
		FIRST NAME	MI	LAST NAME

2

	ACT	PAY TYPE	METH	AMOUNT	ISSU	PAY SCH	PK UP	PERIOD DATE FROM	PERIOD DATE TO	IND LN	SPC CLM	VENDOR ID	CHECK/FSB/VOUCHER NUMBER
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

6/9

LOCAL DISTRICT INFORMATION													
1	2	3	4	5	6	7	8	9	10	11	12	13	14

	A	B	C	D	E
01					
02					
03					
04					
05					
06					
07					
08					
09					
10					

8

ASSOCIATED NAMES					
A	LN NO	CODE	NOT. IND	NAME	
	RESIDENCE ADDRESS				
	CITY/TOWN		STATE	ZIP CODE	
B	LN NO	CODE	NOT. IND	NAME	
	RESIDENCE ADDRESS				
	CITY/TOWN		STATE	ZIP CODE	CANADIAN POSTAL CODE

7

RECOUP-MENT	PAY LN	AMOUNT	PAY LN	AMOUNT	PAY LN	AMOUNT	HEAP VENDOR ID	CUSTOMER ACCOUNT NO.
							VENDOR ID	CUSTOMER ACCOUNT NO.

DATE	WORKER	DATE	AUTHORIZED BY