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								

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							

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

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

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												

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

	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

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

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