REPORT OF SUPPORT COLLECTED

Line 1. Line 2. Case No. Rpt. No.

Depending upon the number of individuals under the age of 21 active on your current Temporary Assistance (TA) case, the Human Resources Administration (HRA) must pay you the first \$100 or \$200 of support paid in the month it is due for someone in your household. This payment is called a "pass-through" payment. This report summarizes the amount of support HRA received for you last month. It also tells you the pass-through payment you will receive.

Line 1 is the amount of support received by HRA last month that was due to be paid last month. You will receive a pass-through payment of **up to \$100** of this amount if there is one individual under the age of 21 active on your TA case or **up to \$200** of this amount if there are two or more individuals under the age of 21 active on your TA case. This payment will not affect the amount of your TA benefit but may affect the amount of your food stamp benefit next month. If Line 1 lists "0", HRA did not receive a support payment for you last month and you will not receive a pass-through payment.

Line 2 is the amount of support received by HRA last month that was paid on time in previous months but not received by HRA until last month. If you did not already receive the full amount of your pass-through payment for the month(s) when these payments were made, you will receive an additional pass-through payment for those months. This payment will not affect your TA benefit or your food stamp benefit. If Line 2 lists "0", HRA did not receive a support payment for you last month for any prior months and you will not receive an additional pass- through payment for those months.

You will receive your pass-through payment when you receive your TA payment via the Electronic Benefit Transfer (EBT) system. Your EBT receipt will **not** separately identify this payment. If you disagree with the amount of the payment, or have other questions regarding this support pass-through payment, contact the HRA Information Line at 1-877-472-8411, and outside New York City at (718) 557-1399. If your concern is not resolved, you may call 1-888-208-4485 (TTY: 1-866-875-9975) Monday–Friday, 8:00 AM–7:00 PM, at no charge to you, to obtain the form for submitting your written request for a desk review.

LDSS-3677 NYC (Rev. 1/10)