

Calculations Worksheet for Desk Review of Cumulative Excess Support Payments

First-Level Desk Review
 Revised First-Level Desk Review
 Second-Level Desk Review

Step 1	
Desk Review Administrative Information (Top portion completed by the Support Collection Unit [SCU]; signature section completed as labeled.)	
Date Request Received: _____	Recipient's Name: _____
Client Identification Number (CIN) _____	Recipient's Address: _____
Temporary Assistance Case Number(s) (TA-CAN): _____; _____; _____; _____	
New York Case Identifier(s) (Child Support Account Number): _____, _____; _____; _____	
Review Period: from: _____ to _____ (month/year) (month/year)	(Begin on the first date the Recipient received TA or the date of birth of the oldest child, whichever is later. End on the last day of the last month child support was kept by the district)
Date(s) of TA: from: _____ to _____; from: _____ to _____; from: _____ to _____ from: _____ to _____; from: _____ to _____; from: _____ to _____	
First-Level Desk Review Completed by the Support Collection Unit	
Name: _____ Title: _____ Telephone Number: _____ Date: _____	
First-Level Desk Review Completed by the TA Unit	
Name: _____ Title: _____ Telephone Number: _____ Date: _____	
If Applicable, Second-Level Desk Review Completed by OTDA Division of Child Support Services	
Name: _____ Title: _____ Telephone Number: _____ Date: _____	
If Applicable, Second-Level Desk Review Completed by the OTDA TA Bureau	
Name: _____ Title: _____ Telephone Number: _____ Date: _____	

Step 2	PA Grant Paid (Completed by the TA Unit. Attach all applicable TA payment records.)
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Total Applicable PA Grant Paid in the Review Period	\$
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Step 3	Total Repayments (Completed by the SCU and the TA Unit. For each source of repayment, attach payment record.)
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A. Child Support (to be completed by SCU)	\$
B. Supplemental Security Income (SSI) Interim Assistance (to be completed by TA Unit)	\$
C. Lottery (to be completed by TA Unit)	\$
D. Lien/Mortgage/Judgment (to be completed by TA Unit)	\$
E. Cash Repayment (after Temporary Assistance closed) (to be completed by TA Unit)	\$
F. Lawsuit Settlement (to be completed by TA Unit)	\$
G. Other (to be completed by the TA Unit)	\$

Step 4	RESULTS (Completed by the TA Unit)
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Total Applicable PA Grant Paid in the Review Period (Step 2)		\$
Total Repayments (From Step 3- total of A-G)	MINUS	\$
Total Cumulative Excess Support Amount (If this amount is less than zero, this is the total amount of cumulative excess support due to the Recipient. If this amount is not zero or greater, there is no cumulative excess support due to the Recipient.)	EQUALS	\$

Comments (SCU/TA Unit):
