

FAMILY INDEPENDENCE ADMINISTRATION

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# POLICY BULLETIN #04-10-OPE

## DOCUMENTATION RECEIPT (EXP-76R)

| <b>D</b>  |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| <b>Date:</b><br>January 20, 2004                        | Subtopic(s):<br>Forms   |  |  |  |  |  |
|   |   |  |  |  |  |  |
| This procedure can<br>now be accessed on the<br>FIAweb. | The purpose of this policy bulletin is to introduce the Documentation Receipt ( <b>EXP-76R</b> ) form.  |  |  |  |  |  |
|   | When an applicant/participant returns to a Job/NPA Food Stamp<br>Center to submit documentation s/he must be given a receipt to<br>verify which documents were submitted. To this end, the<br>Documentation Receipt ( <b>EXP-76R</b> ) form was created.  |  |  |  |  |  |
| Job Center Staff  | This form is to be used in the Paperless Office System (POS)<br>Centers whenever POS is down and the applicant/participant does<br>not have the Documentation Requirements ( <b>W-113K</b> ) form.  |  |  |  |  |  |
|   | In the Non-POS Centers this form must be used whenever the applicant/participant is submitting documents and does not have the <b>W-113K</b> .  |  |  |  |  |  |
|   | If the applicant/participant has the <b>W-113K</b> when submitting documents it will serve as the documentation receipt and must be initialed by the Worker with a copy given to the applicant/participant.   |  |  |  |  |  |
|   | <b>Note</b> : In the Model Job Centers the <b>EXP-76R</b> will be used by the Customer Service Information Centers (CSICs) even if the applicant/participant has the <b>W-113K</b> .  |  |  |  |  |  |
| NPA FS Center Staff                                     | NPA Food Stamp Center staff must use this form whenever an applicant/participant is submitting documents.   |  |  |  |  |  |
| Job Center and NPA FS<br>Center Staff                   | When a Worker receives documents from an applicant/participant, s/he must annotate the <b>EXP-76R</b> indicating the specific document that was submitted and for whom the document was submitted (e.g., birth certificate submitted for Jane Smith). In addition, the Worker must also initial each item on the list submitted by the applicant/participant. |  |  |  |  |  |

| This form must be prepared in triplicate: one copy must be given to  |
|--|
| the applicant/participant, one copy must be filed in the case record |
| and if the documents were accepted by someone other than the         |
| person assigned to the case (e.g., the receptionist or CSIC), one    |
| copy must be submitted to the Worker.                                |

The **EXP-76R** will serve as evidence of the date that the applicant/participant submitted particular documents.

The paper form must be used until an electronic version is available in POS.

Please note: Documents referred to on the **EXP-76R** labeled "USCIS" refer to documents received from the United States Citizenship and Immigration Service (USCIS). This agency was formerly known as the Bureau of Citizenship and Immigration Service (BCIS).

Effective Immediately

## **Reference:**

02 INF 33

Attachment:

**EXP-76R** Documentation Receipt

Forms can now be accessed through Print on Demand at all Job Centers.

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## **Documentation Receipt**

| Application |  | Recertification            |                         |            | Employment                            | Household Change |                         |                     |
|-------------|--|----------------------------|-------------------------|------------|---------------------------------------|------------------|-------------------------|---------------------|
| Last        | Name:  | First Name:                | 1                       | M.I.:      | Case Number:                          | Case Type:       | Social Security Number: |                     |
| Add         | ress (bldg, house no., apt. no, street/avenue, | borough, state, zip code): |                         |            |                                       | Tele             | ephone Number:          |                     |
| Doc         | ument reviewed by:                             |                            | Date document received: |            | Time document received:               |                  |                         |                     |
| Wor         | ker:   |                            |                         |            | Date document scanned:                |                  |                         |                     |
| Q           | Documents                                      | Document submitted for     | Worker's<br>Initial     | , <u>a</u> | Documents                             |                  | Document submitted for  | Worker's<br>Initial |
|             | Adoption Papers                                |                            |                         |            | Military Services Record              |                  |                         |                     |
|             | Auto Registration                              |                            |                         |            | Naturalization Certificate            |                  |                         |                     |
|             | Auto Title                                     |                            |                         |            | Pay Stub/Job Information              |                  |                         |                     |
|             | Award Letter/Other Letter                      |                            |                         |            | Photo I.D. with Address               |                  |                         |                     |
|             | Bank Statement                                 |                            |                         |            | Pregnancy Statement                   |                  |                         |                     |
|             | Birth Certificate                              |                            |                         |            | Property Tax/Mortgage Statement       |                  |                         |                     |
|             | Checking Account                               |                            |                         |            | Rent Receipt/Lease                    |                  |                         |                     |
|             | Citizenship Papers                             |                            |                         |            | School Letter                         |                  |                         |                     |
|             | Death Certificate                              |                            |                         |            | Separation/Divorce Papers             |                  |                         |                     |
|             | Deed to Property                               |                            |                         |            | Social Security Card                  |                  |                         |                     |
|             | Dependent Care Costs Statement                 |                            |                         |            | Social Security Papers                |                  |                         |                     |
|             | Disability Statement                           |                            |                         |            | SSA Letter                            |                  |                         |                     |
|             | Divorce Papers                                 |                            |                         |            | SSI/Social Security Benefit Check     |                  |                         |                     |
|             | Driver's License                               |                            |                         |            | Statement from a Third Party          |                  |                         |                     |
|             | Eviction Papers                                |                            |                         |            | Support Check Stub                    |                  |                         |                     |
|             | Family Court Petition                          |                            |                         |            | USCIS Documentation/Corresponde       | ence             |                         |                     |
|             | Health Insurance Policy/Card/Letter            |                            |                         |            | U.S. Passport                         |                  |                         |                     |
|             | Hospital Letter                                |                            |                         |            | UIB Book/Letter                       |                  |                         |                     |
|             | Income Tax Return                              |                            |                         |            | Unpaid Bills (utility, medical, rent) |                  |                         |                     |
|             | Landlord/Primary Tenant Letter                 |                            |                         |            | Utility Bill                          |                  |                         |                     |
|             | Life Insurance Policy                          |                            |                         |            | Vehicle Registration Card             |                  |                         |                     |
|             | Marriage Certificate                           |                            |                         |            | Veterans Administration Papers        |                  |                         |                     |
|             | Medical Records                                |                            |                         |            | Other:                                |                  |                         |                     |

#### Recibo de Documentación

| Solicitud   |   |     | Recertificación         |                       |                                   | Empleo   |             | Cambios en el Hogar                    |                              |  |
|-------------|---|-----|-------------------------|-----------------------|-----------------------------------|--|-------------|--|------------------------------|--|
| Ape         | lido:   |     | Nombre:                 | 9                     | S.N.:                             | Número del Caso:   | Tipo de Cas | o: Número del Seguro Social            | :                            |  |
| Dire        | Dirección (edif., no. de casa, no. de apt, calle/avenida, condado, estado, código postal). <sup>*</sup> Número de Teléfono: |     |                         |                       |                                   |  |             |  |                              |  |
| Doc         | Documento visto por:  |     |                         |                       |                                   | Fecha que documento fue recibid                          | <br>o:      | Hora en que documento<br>fue recibido: |                              |  |
| Trabajador: |   |     |                         |                       | Fecha que documento fue scaneado: |  |             |  |                              |  |
| ☑           | Documentos  | Doc | umentos entregados para | Inicial d<br>Trabajad | el ☑                              | Documentos   | I           | Documentos entregados pa               | ra Inicial del<br>Trabajador |  |
|             | Documentos de Adopción  |     |                         |                       |                                   | Expedientes del Servicio Militar                         |             |  |                              |  |
|             | Matrícula del Vehículo  |     |                         |                       |                                   | Certificado de Naturalización                            |             |  |                              |  |
|             | Título del Vehiculo   |     |                         |                       |                                   | Talón de Paga/Datos de Empleo                            |             |  |                              |  |
|             | Carta de Adjudicación/Otro Tipo de Carta  |     |                         |                       |                                   | Tarjeta de Identificación con Foto                       | y Dirección |  |                              |  |
|             | Estado de Cuenta Bancaria   |     |                         |                       |                                   | Declaración de Embarazo                                  |             |  |                              |  |
|             | Partida de Nacimiento   |     |                         |                       |                                   | Estado de Impuesto de Propiedao                          | d/Hipoteca  |  |                              |  |
|             | Cuenta Corriente  |     |                         |                       |                                   | Recibo de Alquiler/Arrendamiento                         | )           |  |                              |  |
|             | Documentos de Ciudadanía  |     |                         |                       |                                   | Carta Escolar  |             |  |                              |  |
|             | Certificado de Defunción  |     |                         |                       |                                   | Documentos de Divorcio/Separac                           | ión         |  |                              |  |
|             | Título de Propiedad   |     |                         |                       |                                   | Tarjeta de Seguro Social                                 |             |  |                              |  |
|             | Declaración de Costos de Cuidado<br>de Dependiente  |     |                         |                       |                                   | Documentos de Seguro Social                              |             |  |                              |  |
|             | Declaración de Incapacidad  |     |                         |                       |                                   | Carta de SSA   |             |  |                              |  |
|             | Documentos de Divorcio  |     |                         |                       |                                   | SSI/Cheque de Beneficios de Seg                          | guro Social |  |                              |  |
|             | Licencia de Conducir  |     |                         |                       |                                   | Declaración de Tercera Persona                           |             |  |                              |  |
|             | Comprobante de Desalojo   |     |                         |                       |                                   | Talón de Cheque de Manutenciór                           | ı           |  |                              |  |
|             | Petición de la Corte de Familias  |     |                         |                       |                                   | Documentos/Cartas de USCIS                               |             |  |                              |  |
|             | Poliza/Tarjeta/Carta de Seguro de Salud   |     |                         |                       |                                   | Pasaporte Norteamericano                                 |             |  |                              |  |
|             | Carta del Hospital  |     |                         |                       |                                   | Libreta/Carta de Beneficios de De                        | sempleo     |  |                              |  |
|             | Declaración de Impuestos de Ingresos  |     |                         |                       |                                   | Facturas por pagar (servicio públi<br>médicos, alquiler) | co, gastos  |  |                              |  |
|             | Carta del Casero/Inquilino Primario   |     |                         |                       |                                   | Facturas de Servicios Públicos                           |             |  |                              |  |
|             | Poliza de Seguro de Vida  |     |                         |                       |                                   | Tarjeta de Matrícula Vehicular                           |             |  |                              |  |
|             | Certificado de Matrimonio   |     |                         |                       |                                   | Documentos de Administración de                          | e Veteranos |  |                              |  |
|             | Expedientes Médicos   |     |                         |                       |                                   | Algún Otro:  |             |  |                              |  |