+ INFORMATIONAL LETTER +		TRANSMITTAL: 92 INF-39			
то:	Commissioners of Social Services		: Income Maintenance		
		DATE: S	eptember 24, 1992		
SUBJECT:	Revision to ABEL Input Sheet (DSS-3570A)				
SUGGESTED DISTRIBUTION:	Staff Development Coordinators All Income Maintenance Staff ABEL Liaisons Forms Coordinators				
CONTACT PERSON:	individual at the For ABEL PA Questic For ABEL FS Questic For FS Motor Vehic Representative, ex For Employment Calc extension 4-9313	15 and ask for the following indicated extension: ions - Gene Reilly, extension 3-7991 ions - Carl Poole, extension 3-9779 cle Questions - Your FS County xtension 4-9225 lculation Questions - Greg Nolan, ns - Bob Gullie, extension 4-3913			
ATTACHMENTS:	DSS-3570A: ABEL I	nput Sheet - not a	vailable on-line		

Previous	Releases	Dept. Regs.	Soc. Serv.	Manual Ref.	Misc. Ref.
ADMs/INFs	Cancelled		Law & Other	ł	
			Legal Ref.		
92 INF-2	92 INF-2		Family	ABEL	ABEL
			Assistance	Manual	Transmittal
			Act	C-1, C-12,	91-2
				C-35	89-4

FILING REFERENCES

Trans. No. 92 INF-39

The purpose of this release is to introduce the 9/92 version of the DSS-3570A: ABEL Input Sheet (copy attached).

This optional form may be used to record information necessary to complete an ABEL PA and/or FS Budget in the Welfare Management System (WMS). The reverse side of the Input Sheet provides an area to calculate an individual's average income and an area to calculate the value of a motor vehicle as a Food Stamp resource.

The revisions to this form reflect a change to the FS ABEL budget screen (migrated to production on March 14, 1992).

The revisions to the 11/91 version of the DSS-3570A, which are included in the current 9/92 version, are outlined below:

- I. General The revision date on both sides was changed to 9/92.
- II. FS Budget

In the "SHELTER" section on the first line, a one character field labeled "FUEL TYPE" was added.

Delivery of the revised DSS-3570A to the Albany Warehouse is expected in November, 1992. Your district will <u>not</u> automatically receive copies. In order to ensure that usage of the revised form begins within a reasonable amount of time, you may continue to use the previous (11/91) version of the DSS-3570A until your stock is depleted, or until January, 1993, whichever occurs first. Reorders will be filled with the 9/92 version.

Future requests for the DSS-3570A should be submitted on Form WMS-47 (Rev. 9/89): "WMS Order Form" and should be sent to:

New York State Department of Social Services Welfare Management System P.O. Box 1990 Albany, New York 12201 Attention: Office of Systems Development (OSD)

Questions concerning ordering the forms should be directed to the Office of Systems Development by calling 1-800-342-3715, extension 6-6223.

Oscar R. Best, Jr. Deputy Commissioner Division of Income Maintenance