

# Kids Central, Inc. System of Care Policy & Procedure

---

<b>Series:</b>	<b>Master Trust Accounts</b>	
<b>Policy Name:</b>	<b>Annual Representative Payee Report</b>	
<b>Policy Number:</b>	<b>1201</b>	
<b>Origination Date:</b>	<b>07/01/10</b>	<b>Revision Date: 01/05/12</b>
<b>Authority:</b>	<b>402 F.S., 737 F.S., 39 F.S., 415 F.S., 65C-17 F.A.C</b>	
<b>Attachments:</b>	Sample Annual Representative Payee Report (Form SSA-6234-OCR-SM)	

---

## **Purpose**

To explain the necessary steps that needs to be taken in order to accurately and timely complete the Social Security Administration Representative Payee Report (Form SSA-6234-OCR-SM).

## **Policy**

It is the policy of the organization to ensure the Representative Payee Report is completed accurately and mailed to the Social Security Administration within ten (10) days of receipt of the report.

## **Procedure**

1. The Representative Payee Report, a yearly report required to be completed by the Representative Payee on each client account will be mailed with instructions and a return envelope by the Social Security Administration. The form will indicate the amount of funds paid to the client and savings reported on last year's report.
2. The form should be completed and returned to the address indicated on the return envelope within 10 days of receipt of the form.
3. Open FAST system– Select Reports for the client
4. On the Representative Payee Report: #1 should be marked as YES
5. Run a Transaction Report for the dates of the Report Period. Sort the report to display total amounts for:
  - Transactions 200 (Deposits) – Should match first line #2 (Do not include any deposit for Refund of Fees requested to the Treasury)
  - (If amount of deposits does not match, you might have to increase/decrease one month at start or end of the report period to account for the months that we get double deposits into the same month.)

# Kids Central, Inc. System of Care Policy & Procedure

---

6. #2 A. The answer should be YES
7. #2 B. The answer should be NO
  - Enter a ZERO, as dollar amount
8. #2 C. Food and Housing – Enter the amount on the FAST report as Transaction 300 (Maintenance Fees), rounding the figure. This amount is the cost of care paid for during the period.
9. #2 D. Other things (clothing, education, medical and dental expenses, recreation or personal items)
  - Enter the amount on the FAST report as Transactions 600's, rounding the figure.
  - Indicate on the Remarks section if any check(s) were written to the Social Security Administration as overpayments and/or conserved funds.
10. #2 E. Savings – show the Balance amount on the FAST report, this amount will include Transactions 900 (Interest/Service Charges).
11. #3A. Type of Account: Place and "X" in: Collective Savings/Checking Account
12. #3B. Title of Account: Place and "X" in: Your Name for Beneficiary's Name
13. #4 A & B Not applicable  
Remarks – use this section if necessary
14. #5, 6, 7 and 8 – sign the statement, enter the date, print job title, and provide phone contact information

**Approved By:**

\_\_\_\_\_  
Cynthia A. Schuler, Chief Executive Officer

\_\_\_\_\_  
Date