

Steven Banks
Commissioner

Martha A. Calhoun
General Counsel

Vincent Pullo
Agency Chief
Contracting Officer

180 Water Street
New York, NY 10038

929 221 6347

October 6, 2014

Re: **Addendum #1 to the
Request for Proposals for
Accounts Maintenance Service
EPIN: 09613P0004
PIN: 069143100011**

Dear Prospective Proposer:

The Human Resources Administration (HRA) appreciates your interest in the Request for Proposals (“RFP”) for Accounts Maintenance Service issued on September 24, 2014.

Please find attached Addendum #1 for the above-referenced Request for Proposals. Addendum #1 contains:

- **Revisions to the RFP:** Attached to this Addendum as Attachment A are revisions to the Accounts Maintenance Service RFP. **All new language is bolded and underlined.**
- **Attachment B:** Attachment B contains a list of vendors who downloaded the RFP from HRA’s website, Vendor download list. Please note that this list is current as of October 2, 2014.
- **Attachment C:** Attachment C contains the Sign-In Sheets of the Pre-Proposal Conference Attendees.
- **Attachment D:** Attachment D includes the PowerPoint Presentation from the Pre Proposal Conference.
- **Attachment E:** Attachment E includes the Handouts presented at the Pre-Proposal Conference.
- The Annual Report for the Office of Child Support Enforcement program can be accessed at www.nyc.gov/html/hra/html/services/child.shtml.

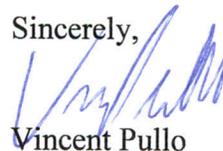
Please acknowledge your receipt of Addendum #1 by listing in on the Acknowledgment of Addenda Form (Attachment C of the RFP package) and including it in your proposal submission.

Proposers are reminded that they must deliver their proposals by **November 5, 2014 at 2:00 pm** to:

**NYC Human Resources Administration
Office of Contracts – RFP Unit
180 Water Street, 14th Floor
New York, NY 10038**

Proposals received at this location after the proposal due date and time are late and shall not be accepted by the Agency, except as provided under the New York City Procurement Policy Board Rules.

Sincerely,



Vincent Pullo

ATTACHMENT A

Revisions to the Request for Proposals for Accounts Maintenance Service

Addendum #1 to the Request for Proposals for Accounts Maintenance Service

Attachment A

Please be advised that the subject RFP is revised as described below. All new language is bolded and underlined. The email address of the authorized agency contact person has been added to the cover page of the RFP.

Page 1:

AUTHORIZED AGENCY CONTACT PERSON

Proposers are advised that the Authorized HRA Contact Person for all matters concerning this Request for Proposals is:

Endrhis Santana, Director of Management & Planning
HRA
Office of Child Support Enforcement
2 Washington Street
New York, N.Y. 10004
Tel: (929) 221-4394
Email: endrhis.santana@dfa.state.ny.us

ATTACHMENT B

List of vendors who downloaded the RFP from HRA's website.



FOR RFP: RFP_Accounts_Maintenance_Service.pdf

Company Name	Name	Contact Name	Email Address	Mailing Address	City	State	Zip/Postal Code	Telephone
Alpha Lazer Richmond Corp	Robert	Robert Regina	robert@alphalaserrichmond.com	140 Main street	Staten Island	NY	10307	(718) 317-1263
Amtex Systems Inc.	Peter Mule'	Peter Mule'	pmule@amtexsystems.com	50 Broad street, 801	New York	NY	10004	(646) 200-7118
Business Intelligence Associates	Leah Greene	Leah Greene	lgreene@biaprotect.com	39 Broadway, 26th Floor	New York	NY	10006	(212) 240-2282
CDS Global	Sandra Fallis	Sandra Fallis	sfallis@cds-global.com	1901 Bell Ave	Des Moines	IA	50315	(515) 280-4121
Data Marketing Group	Keitha Rocco	Joan Hare	jhare@dmgltd.org	60 E Industry Ct #500	Deer Park	NY	11729	(631) 586-5800
DataBank IMX, LLC	Jeffrey Malone	Jeffrey Malone	jmalone@datbankimx.com	61 Greenleigh Drive	Sewell	NJ	08080	(856) 381-5561
Datrose	Eunice Sonnevile	Eunice Sonnevile	esonneville@datrose.com	660 Basket Rd	Webster	NY	14580	(585) 217-0225
Delttek	Clint Poyaoan	Clint Poyaoan	clintpoyaoan@Delttek.com	2291 Wood Oak Drive	Herndon	VA	20171	(800) 456-2009
DIAMOND POWER CONSULTANT GROUP, INC.	WOODY ANTHONY CHARLES	WOODY ANTHONY CHARLES	DIAMOND-POWER-CONSULTANT@LIVE.COM	384 EAST 35TH STREET	BROOKLYN	NY	11203	(646) 416-6988
Document Integration Technologies, Inc.	Earlie Butler	Earlie Butler	ebutler@ditinc.com	623 Eagle Rock Avenue suite 113	West Orange	NJ	07052	(718) 552-2331
EQOD, LLC	Jacque Tannenbaum	Jacque Tannenbaum	jacque@eqod.com	130 Archbold Place	Westfield	NJ	07090	(908) 591-2560
Global Group, Inc	Dundi Gurram	Dundi Gurram	dundi.gurram@1ggi.com	dundi.gurram@1ggi.com	Princeton	NJ	08540	(609) 853-0300
HealthDetail	Darrell DeVeaux	Darrell DeVeaux	ddeveaux@healthdetail.com	2001 Martin Luther King Jr Dr SW Ste 450B	Atlanta	GA	30310	(678) 261-7088
Hinman Straub P.C.	Danielle Trimpop	Danielle Trimpop	DTrimpop@hinmanstraub.com	121 State Street	Albany	NY	12207	(518) 436-0751
Longi Engineering	Adnan Longi	Adnan Longi	alongi@longieng.com	40 West 37th Street Suite 301	New York	NY	10018	(212) 997-9444
New York Legal Publishing Corp	Ernest Barvoets	Ernest Barvoets	ebarvoets@nylp.com	120 Broadway	Menands	NY	12204	(518) 459-1100
Novalink Solutions LLC	Novalink	Huu Phan	novalink.recruitment@novalink-solutions.com	2180 Satellite Blvd, Suite #400, Duluth GA 30097	Atlanta	GA	30097	(404) 513-3385
NPC, Inc.	Bruce Gochnour	Bruce Gochnour	Bruce.Gochnour@npcweb.com	13710 Dunnings Highway	Claysburg	PA	16625	(814) 239-8787
Onvia	Onvia	Source Management	sourcegmt@onvia.net	509 Olive Way Suite 400	Seattle	WA	98101	(206) 373-9500
PC Data Centers of PA, Inc	Irene Walters	Irene Walters	iwalters@pcdatacenters.com	67-69 Public Square 7th Floor	Wilkes Barre	PA	18701	(570) 826-9811
Prime Vendor Inc	Ashley Reed	Ashley Reed	work41@prime-vendor.com	4622 Cedar Ave	Wilmington	NC	28403	(800) 746-9554
QED National	QED National	Colleen Molter	cmolter@qednational.com	350 Seventh Avenue, 10th Floor	New York	NY	10001	(212) 481-6868
Sanjoy Augustine CPA, PLLC	Sanjoy augustine	Sanjoy augustine	sa@cpautrust.com	268-03 Hillside Ave	Floral Park	NY	11004	(718) 343-2371
SFJH@	FGH	RTFH	FGH@FO.COM	DFG	DFHG	NY	12185	(555) 555-5555
smi	sheia selig	sheila selig	seligs@optonline.net	194 Harborview South	Lawrence	NY	11559	(646) 265-9201
SOURCECORP BPS Inc	Mike Smith	Mike Smith	mike.smith@sourcehov.com	102 London Shopping Cntr	London	KY	40741	(606) 309-6855
status data	jerrold weinstein	jerrold weinstein	jerrold@statusdata.com	38 west 32nd st suite 600	new york	NY	10001	(212) 947-0143
Stellar Services, Inc.	Liang Chen	Liang Chen	contact@stellarservices.com	70 West 36th Street, Suite 702	New York	NY	10018	(212) 432-2848
Team Patti, Ltd	KannerConnect	Patti Kanner	patti@kannerconnect.com	1370 Boxwood Drive West	Hewlett	NY	11557	(516) 316-0264
Top Temporaries, Inc.	Maria S Roldos	Lydia Vargas	lydia@cqny.com	500 8th avenue Suite 211	New York,	NY	10018	(212) 695-2429
Ubiqu Reporting Inc.	Rachel Breyer	Rachel Breyer	rbreyer@ubiqu.com	22 Cortlandt Street, Suite 802	New York	NY	10007	(212) 346-6627
VIVA USA INC	Ilango	Ilango Radhakrishnan	govtbids@viva-it.com	3601 Algonquin Road, Suit 425	Rolling Meadows	IL	60008	(847) 368-0860
Xerox	Robert Madan	Robert Madan	bob.madan@xerox.com	757 Orchard Drive	Walkill	NY	12589	(518) 331-8907
Xerox	Scott Cade	Scott Cade	scott.cade@xerox.com	485 Lexington Avenue, 10th floor	New York	NY	10017	(917) 265-3938
yms management	mark selig	mark selig	mark@ymsmanagement.com	160 broadway	new york	NY	10038	(212) 374-9009
YoungWilliams	Mary Ann Wellbank	Mary Ann Wellbank	mwellbank@ywcass.com	P.O. Box 23458	Jackson	MS	39225	(406) 933-8009

Total Contacts for this RFP:

ATTACHMENT C

Sign-In Sheets of the Pre-Proposal Conference Attendees.

HUMAN RESOURCES ADMINISTRATION
OFFICE OF CHILD SUPPORT AND ENFORCEMENT

PRE-PROPOSAL CONFERENCE FOR
ACCOUNTS MAINTENANCE RFP
PIN: 069143100011 / E-PIN: 09613P0004

October 1, 2014

	PRINT COMPANY NAME	PRINT ADDRESS	TELEPHONE & FAX	PRINT CONTACT PERSON & E-MAIL ADDRESS	RFP PICK-UP	
					ON LINE	IN PERSON
1.	Source Hor Mike Smith	109 London Shopping London ky 40141 Source Hor	606-878-4118/Fax 606-309-6855	Mike Smith Mike.Smith@sourcehor.com	✓	
2.	PMT Tracking Corporation	112 W. 34th St. 15th Fl, NYC 10120	212.946.2621 907	Rosalind Tait rosalind.tait@pmttracking.com		
3.	SoundPrint SoundPrint	925 Northport PKY Suite 207 Alhambra, CA 91805	714-818-1466	Kevin Bayte Kevin.Bayte@soundprint.com	✓	
4.	PMS Management	160 Broadway NY NY 10638	212-374-9009 212-374-1067	Mark Selig Mark@PMSManagement.com	✓	
5.						
6.						
7.						
8.						

HUMAN RESOURCES ADMINISTRATION
OFFICE OF CHILD SUPPORT AND ENFORCEMENT

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PIN: 069143100011 / E-PIN: 09613P0004

October 1, 2014

	PRINT COMPANY NAME	PRINT ADDRESS	TELEPHONE & FAX	PRINT CONTACT PERSON & E-MAIL ADDRESS	RFP PICK-UP	
					ON LINE	IN PERSON
1.	Edony Marketing Systems	79 Alexander Ave Bronx NY 10454	(718) 742-0000	K K Fuentes @ edony Systems.com	✓	✓
2.	Se DataRose Inc	4600 Basket Road Webster NY	800-615-6144	Cheryl Keels ckeel@datarose.com	✓	
3.	Xerox	2 computer DR ALBANY	518 3201853	BOB.MADAME Xerox.com	✓	✓
4.	EQOD	130 Archbold Pl Westfield, NJ 07090	908-591-2560	Jacquie Tannenbaum jacquie@eqod.com	✓	
5.	Shella Selig	194 HWS Law, NY 11579	676-265-9229	Shella Selig Selig@optonline.net	✓	
6.						
7.						
8.						

HUMAN RESOURCES ADMINISTRATION
OFFICE OF CHILD SUPPORT AND ENFORCEMENT

PRE-PROPOSAL CONFERENCE FOR
ACCOUNTS MAINTENANCE RFP
PIN: 069143100011 / E-PIN: 09613P0004

October 1, 2014

	PRINT COMPANY NAME	PRINT ADDRESS	TELEPHONE & FAX	PRINT CONTACT PERSON & E-MAIL ADDRESS	RFP PICK-UP	
					ON LINE	IN PERSON
1.	Southeast	Cornell TX	781-405-8810	Paul R. Southeast Paul.Rio@Southeast.com	✓	
2.	STATUS DATA	38 W 32nd St NY NY 10001	212 947-0143	TERROLD @ STATUSDATA.COM	✓	
3.	Lillians PROFESSIONAL SVCS	629 Throop Ave Bklyn NY 11246	718 953 6455	William T. Bowman 400-917-324-7793 EMAIL: LILPROFSVC@eod.com	✓	
4.	The Garry Group IHR	300 Corporate Plaza Islandia NY 11749	631-963-0060 x302	Terri Bayle-Miller tbayle@garrygroup.com	✓	
5.						
6.						
7.						
8.						

ATTACHMENT D

PowerPoint Presentation

Accounts Maintenance RFP Pre-Proposal Conference

October 1, 2014

2 PM – 4 PM

Scope of Services

Definitions

- SCU – Support Collection Unit (OCSE)
- Custodial Parent (CP)/Petitioner
 - Parent, relative, or guardian who lives with and is the primary caretaker of the child or children OR the person or organization that files a formal request to initiate a court action.
- Non-Custodial Parent (NCP)/Respondent
 - Parent who does not live with and is not the primary caretaker of a minor child OR person who responds to the petition (whichever party is filed against for relief).

Summary of Actions

Task	Basic Data Entry	Interpretation of Documents	Mathematical Computation	Batch Work	Update Remarks
Returned Mail	X				X
Court Messages	X	X			X
Orders/Modifications	X	X	X	X	X
Court Orders from Other States	X	X	X	X	X
Conversion/De-conversion	X	X	X	X	X
Account Maintenance Work Reports	X	X	X	X	X

Highlights

- ALL actions require narrative remarks
- Instructions will be provided to vendor
- Estimated volumes are included in RFP
- Required timeframes for completion indicated in RFP
 - OCSE monitors timeframes
 - Penalties if timeframes not met

Line Data Entry Services

- Returned, Undeliverable Mail
- Returned, Completed Information Forms
- Court Messages

Line Data Entry

- Returned, Undeliverable Mail (*RFP p. 9*)
 - System: ASSETS
 - This process requires:
 - Accessing individual case records to perform line data entry
 - Minimal interpretation of documents
 - No mathematical calculations
 - No batch/fiscal data entry
 - No consultation of other computer systems
 - Narrative remarks entry
 - Changes to status codes or other fields (such as addresses), if applicable

Line Data Entry cont.

- Completed Information Forms (*RFP p. 9-10*)
 - System: ASSETS
 - This process requires:
 - Accessing individual case records to perform line data entry
 - Minimal interpretation of documents
 - No mathematical calculations
 - No batch/fiscal data entry
 - No consultation of other computer systems
 - Narrative remarks entry
 - Changes to status codes or other fields (such as addresses), if applicable

Line Data Entry cont.

- Court Messages (*RFP p. 10*)
 - System: ASSETS
 - This process requires:
 - Accessing individual case records to perform line data entry
 - Minimal interpretation of documents
 - Minimal to no mathematical calculations
 - Minimal to no batch/fiscal data entry
 - No consultation of other computer systems
 - Narrative remarks entry
 - Changes to status codes, if applicable

Line & Batch Data Entry Services

- Orders/Modifications
- Court Orders by Other States (UIFSA Orders)
- Conversions/Deconversions
- Account Maintenance Work Reports

Line and Batch Data Entry

- New Orders/Modifications (*RFP p. 10-11*)
 - System(s): ASSETS, UCMS and WRTS
 - This process requires:
 - On line data entry to numerous fields
 - Review and interpretation of documents
 - Numerous instances of batch/fiscal data entry, with mathematical calculations
 - Possible consultation of other computer systems
 - Narrative entry

Line and Batch Data Entry cont.

- Court Orders Issued by Other States (*RFP p. 12*)
 - System(s): ASSETS, UCMS and WRTS
 - This process requires:
 - On line data entry to numerous fields
 - Somewhat intensive review and interpretation of documents
 - Numerous instances of batch/fiscal data entry, with mathematical calculations
 - Possible consultation of other computer systems
 - Narrative entry

Line and Batch Data Entry cont.

- Conversions/Deconversions (*RFP p. 12*)
 - System(s): OCSE Web, ASSETS, WRTS
 - This process requires:
 - On line data entry to a number of fields
 - Case review before action can be taken
 - Limited instances of batch/fiscal data entry, with possible need for mathematical calculations
 - Possible consultation of other computer systems
 - Narrative entry

Line and Batch Data Entry cont.

- Account Maintenance Work Reports (*RFP p.12-13*)
 - System(s): OCSE Web, ASSETS
 - This process requires:
 - On line data entry to a number of fields
 - Case review before action can be taken
 - Limited instances of batch/fiscal data entry, with possible need for mathematical calculations
 - Possible consultation of other computer systems
 - Narrative entry

Summary of Actions

Task	Basic Data Entry	Interpretation of Documents	Mathematical Computation	Batch Work	Update Remarks
Returned Mail	X				X
Court Messages	X	X			X
Orders/Modifications	X	X	X	X	X
Court Orders from Other States	X	X	X	X	X
Conversion/De-conversion	X	X	X	X	X
Account Maintenance Work Reports	X	X	X	X	X

Referring Cases to OCSE

- Cases where the information provided is contradictory.
 - E.g., ACS states the order is payable through SCU, yet the remarks state the order is payable directly to the CP
- Cases where the information provided is unclear.
 - E.g., Cannot determine who is the respondent and who is the client
- Cases where there is a local order and then we receive a UIFSA order
- Cases where an order is made and the child is emancipated
- Orders with obligation amounts for other expenses
- Certain types of registrations which are unclear
 - Double registrations - the order is registered in the same court under different docket numbers
 - Modifications of registrations
- Deconversion cases where there has been a change in the head of household or WRTS states the child is deceased
- Cases where there is undisbursed money on the case prior to the vendor working on the case
- The obligation established is not consistent with the written remarks and/or effective date.
- Any inquiry the vendor feels needs additional clarification before proceeding.

ATTACHMENT E

Handouts presented at the Pre-Proposal Conference

Account Creation Summary

CSMS #

Messages Dated :

Docket # :

BASIC INFORMATION

Message Id :

Court Order Date :

Court Action : Temporary Order of Support , Issue Joined

Obligation Types : Basic

COURT INFORMATION

Court Name : New York County Family Court

Court Location : 60 Lafayette Street, New York , NY 10013

File # :

Hearing Part : 26

Support Magistrate Name :

Id

County of Origin : New York

Next Appearance :

CUSTODIAN DATA

Name

SSN :

Address :

Date of Birth :

Employment Status : unknown

NON-CUSTODIAL PARENT DATA

Name :

SSN :

Address :

Date of Birth :

Employment Status : unknown

Public Assistance Status :

Name	Client Id	Prog-ind.Status	Case Status	Case Id	Suffix	Case Type
		FS- Rejected/Denied	Rejected/ Denied		01	Non-Public Assistance Supplemental Nutrition Assistance Prog
		FS- Rejected/Denied , PA- Rejected/Denied , MA- Rejected/Denied	Rejected/ Denied		01	Safety Net FNP Cash Assistance (SN-CSH)

Account Creation Summary

CSMS #

Messages Dated :

Docket #

OTHER PAYEE DATA

Name : Commissioner of Social Services

SSN :

Address : 130 Water Street, New York , NY 10038

Date of Birth :

Employment Status : unknown

Account Creation Summary

CSMS #

Messages Dated

Docket #

CSSA

	Adj.Gross Income	Annual Amount	Pro-Rata Share
NCP	\$0.00	\$0.00	0%
CP	\$0.00	\$300.00	0%

CSSA Followed : Yes

Order on Default : No

SUPPORT ORDER DATA-PAYABLE THROUGH SCU

Date of Order

Petition Type : Support After Acknowledgment of Paternity

Prior Order Date :

IVD AT Filing : True

IVD AT Disposition : False

Payor Name :

Effective Date

Order Name : Order of Support

Payee Name : Commissioner of Social Services

Obligation Type : Basic

First payment Due Date :

Amount : \$150.00

Frequency : monthly

Order Subjects :

Name	SSN	Date of Birth

At a term of the Family Court of the
State of New York, held in and for
the County of New York, at 60
Lafayette Street, New York, NY
10013, on,

PRESENT:

In the Matter of a Support Proceeding

File #:

Docket #:

Commissioner of Social Services, O/B/O

CSMS #:

Assignor,

- against -

**TEMPORARY ORDER OF
SUPPORT
BY DEFAULT¹**

, SSN: XXX-XX-

Respondent.

NOTICE: YOUR WILLFUL FAILURE TO OBEY THIS ORDER MAY RESULT
IN INCARCERATION FOR CRIMINAL NON-SUPPORT OR CONTEMPT.
YOUR FAILURE TO OBEY THIS ORDER MAY RESULT IN SUSPENSION OF
YOUR DRIVER'S LICENSE, STATE-ISSUED PROFESSIONAL, TRADE,
BUSINESS AND OCCUPATIONAL LICENSES AND RECREATIONAL AND
SPORTING LICENSES AND PERMITS; AND IMPOSITION OF REAL OR
PERSONAL PROPERTY LIENS.

Obligation Summary

			Method
Basic Payment		\$150.00 monthly	SCU

Commissioner of Social Services filed a petition in this Court on June 23, 2014 alleging
that is chargeable with the support of:

Name

Date of Birth

Social Security Number

failed to appear before this Court or to answer the petition after having
been properly served;

current employer is unknown;

NOW, after examination and inquiry into the facts and circumstances of the case,

¹If you were not in Court for the hearing, any challenge or objection to this Order may be
limited to the filing of a Motion to Vacate the Order.

IT IS HEREBY ORDERED that upon notice of this order, [redacted] shall pay the sum of \$150.00 monthly to Commissioner of Social Services payable through the Support Collection Unit, such payments to commence on [redacted] for and toward the support of [redacted] children, allocated as follows:

<u>Name</u>	<u>Social Security #</u>	<u>Date of Birth</u>	<u>Allocated Amount</u>
children:			\$150.00 monthly

Total Child Support: \$150.00 monthly

IT IS FURTHER ORDERED that all payments payable through the Support Collection Unit shall be made by check or money order payable to and mailed to: NYS Child Support Processing Center, PO Box 15363, Albany, NY 12212-5363. The county name and New York Case Identifier number (CSMS) [redacted] for the matter must be included with the payment for identification purposes;

IT IS FURTHER ORDERED that the payor, custodial party and any other individual parties immediately notify the Support Collection Unit of any changes in the following information: residential and mailing addresses, social security number, telephone number, driver's license number; and name, address and telephone numbers of the parties' employers;

IT IS FURTHER ORDERED that when the person or family to whom family assistance is being paid, no longer receives family assistance, support payments shall continue to be made through the Support Collection Unit, unless such person or family requests otherwise;

IT IS FURTHER ORDERED that this Order shall be enforceable pursuant to Section 5241 or 5242 of the Civil Practice Law and Rules, or in any other manner provided by law.

Please be advised that your next scheduled appearance is on [redacted] at 9:00 AM in Part 26 before [redacted] Support Magistrate.

Dated: September 18, 2014

ENTER

Docket No

4-b

Check applicable box:

- Order mailed on [specify date(s) and to whom mailed]: _____
- Order received in court on [specify date(s) and to whom given]: _____

Account Creation Summary

Account Creation Summary(retro Order)

CSMS # :

Messages Dated

Sample 1c
Docket # :

BASIC INFORMATION

Message Id :

Court Order Date

Court Action : Order of Support , Retro Ordered , Health Insurance Availability

Obligation Types : Basic , Basic

COURT INFORMATION

Court Name : New York County Family Court

Court Location : 60 Lafayette Street, New York , NY 10013

File # :

Hearing Part : 35

Support Magistrate Name :

Id :

County of Origin : New York

Next Appearance :

CUSTODIAN DATA

Name :

SSN :

Address :

Date of Birth :

Employment Status : unknown

NON-CUSTODIAL PARENT DATA

Name :

SSN :

Address :

Date of Birth :

Employment Status : employed

Name of Employer :

Contact Person :

Phone :

Address :

Email :

Fax :

Public Assistance Status :

Name	Client Id	Prog-ind.Status	Case Status	Case Id	Suffix	Case Type
		MA-Closed	Closed		01	Medical Assistance

Account Creation Summary

CSMS # :

Messages Dated

Docket # :

Public Assistance Status :

Name	Client Id	Prog-ind.Status	Case Status	Case Id	Suffix	Case Type
		PA- Rejected/Denied	Rejected/ Denied		01	Emergency Assistance to Families
		FS- Rejected/Denied	Rejected/ Denied		01	Non-Public Assistance Supplemental Nutrition Assistance Prog
		MA-Closed	Closed		01	Medical Assistance - Family Health Plus
		FS-Closed	Rejected/ Denied		01	Non-Public Assistance Supplemental Nutrition Assistance Prog

OTHER PAYEE DATA

Name : Commissioner of Social Services

SSN :

Address : 180 Water Street, New York , NY 10038

Date of Birth :

Employment Status : unknown

Account Creation Summary

CSMS #

Messages Dated :

Docket #

MEDICAL INSURANCE

Non-Custodial Parent :

Name :

NOT OFFERED

Ordered : NO

Custodial Parent :

Name :

PARTY NOT PRESENT

Ordered : YES

Ordered To : Enroll or Apply

Provider Name : CHP/MEDICAID

Group Number :

Policy Number :

Type of Benefit : Medical

Premium : UNKNOWN

Frequency :

Children :

Name	SSN	Date of Birth

CSSA

	Adj.Gross Income	Annual Amount	Pro-Rata Share
NCP	\$0.00	\$0.00	0%
CP	\$0.00	\$0.00	0%

CSSA Followed : Yes

Order on Default : No

REMARKS

Account Creation Summary

CSMS # :

Messages Dated

Docket # :

ACC

Resp. waives counsel

Based on the Findings of Fact:

F/O/S for \$35/week for 2 children payable thru SCU to CSS effective First payment date is

Retro is set at \$125.00 minus a credit for any payments on Temp. order.

SUPPORT ORDER DATA-PAYABLE THROUGH SCU

Date of Order :

Petition Type : Support After Acknowledgment of Paternity

Prior Order Date :

IVD AT Filing : True

IVD AT Disposition : True

Payor Name :

Effective Date :

Order Name : Retro Ordered

Payee Name : Commissioner of Social Services

Obligation Type : Basic

As of Date :

End Date :

Set At Amount : \$125.00

Payor Name :

Effective Date

Order Name : Order of Support

Payee Name : Commissioner of Social Services

Obligation Type : Basic

First payment Due Date :

Amount : \$35.00

Frequency : weekly

Order Subjects :

Name	SSN	Date of Birth

Financial Transactions

District: 66 NEW YORK CITY Reference Number: Transaction Type: Total Amount: User Name: Date Sent:
 Batch Number: Transaction Number: Number of Transactions:

Line No.	Account Number *	Transaction Amount *	Receipt Date *	Noncustodial Parent	Custodial Parent	Field 1	Field 2	Copy/Paste
01								C F
02								C F
03								C F
04								C F
05								C F
06								C F
07								C F
08								C F
09								C F
10								C F
11								C F
12								C F
13								C F
14								C F
15								C F
16								C F
17								C F
18								C F
19								C F
20								C F

INTERSTATE IV-D CASE ACTION REQUEST

DATE:

FROM: New York State Child Support Processing Center
Interstate Central Registry
P. O. Box 15366
Albany, NY 12212-5366
Pre-Case-Establishment Telephone Number: 1-518-320-1077
Post-Case Establishment Telephone Number: 1-888-208-4485, option 3

TO: Clerk of the Family Court
IV-D Interstate Attorney
Supervisor, Child Support Enforcement Unit
KINGS County

RE: UIFSA Paternity/Support Petition
 Registration/Modification of Foreign Support Order or Income-Withholding Order
 Modification of NYS Support Order
 Determination of Controlling Order

vs.

CSMS Case No.:

Dear Colleague:

Enclosed for your action are documents received from another state's IV-D agency pursuant to the Family Court Act of the State of New York, Article 5-B (UIFSA). A copy of our acknowledgment to the initiating jurisdiction is attached for your information. All appropriate documents have been provided to the Court as well as to the IV-D Interstate Attorney, and a copy of the transmittal has been sent to the Child Support Enforcement Unit.

In the event this case has been forwarded to the inappropriate tribunal, please forward the entire packet to the appropriate tribunal pursuant to FCA section 580-306, and notify the initiating jurisdiction that is acting on the petitioner's behalf. If you notify this office as well we will close the CSMS case in your county and open one in the appropriate county.

Please notify the initiating jurisdiction of your docket number and hearing date(s). Should you require additional documentation or have other questions in order to further process this case, please contact the initiating jurisdiction directly.

Location/employment lead information may be available from the NYS Child Support Management System (CSMS) to aid in service of process or in financial discovery. If service of process is unsuccessful, pursuant to FCA section 580-307(b)(6), please notify the initiating jurisdiction accordingly.

Also notify the initiating jurisdiction as to the final disposition of this action, and provide them with copies of your court order, notice of registration, or notice of determination of controlling order, as applicable.

Enclosure(s)

CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 – INITIAL REQUEST

Petitioner

IV-D Case:

- TANF
- IV-E Foster Care
- Medicaid Only
- Former Assistance
- Never Assistance

File Stamp

Respondent

Non-IV-D Case:

To: (Agency Name and Address)

Responding FIPS Code _____ State NY

Responding IV-D Case No. _____

Responding Tribunal No. _____

From: (Agency Name and Address)

**New York State Child Support Processing Center
Interstate Central Registry
P. O. Box 15366
Albany, NY 12212-5366**

Initiating FIPS Code _____ State VA

Initiating IV-D Case No. _____

Initiating Tribunal No. _____

ACKNOWLEDGMENTS

Return This Form to Initiating State

Request Received and No Additional Information is Necessary

Additional Information Needed

- | | |
|---|--|
| <input type="checkbox"/> Arrears Statement/Payment History | <input type="checkbox"/> Support Order(s) |
| <input type="checkbox"/> Uniform Support Petition | <input type="checkbox"/> Divorce Decree |
| <input type="checkbox"/> General Testimony/Affidavit | <input type="checkbox"/> Assignment of Rights |
| <input type="checkbox"/> Affidavit in Support of Establishing Paternity | <input type="checkbox"/> Description of Real/Personal Property |
| <input type="checkbox"/> Acknowledgment of Parentage | <input type="checkbox"/> Photograph of Respondent |
| <input type="checkbox"/> Other Documents Relating to Paternity | <input type="checkbox"/> Other (See Remarks) |

Remarks/Response:

Your Case has been forwarded for action to:

Name of Worker (first, middle, last)

FAMILY COURT OF THE STATE OF
NEW YORK, KINGS COUNTY

NYC LAW DEPARTMENT, OFFICE OF
CORP. COUNSEL

NYC OCSE/INTERSTATE UNIT

Agency Name

**YOUR CASE WAS FORWARDED TO
FAMILY COURT. ANY QUESTIONS
REGARDING A HEARING DATE OR
REGISTRATION, CONTACT:**

**FAMILY COURT OF THE STATE OF NEW
YORK, KINGS COUNTY
330 JAY STREET**

BROOKLYN, NY, 11201

**FOR STATUS REQUESTS, BEFORE THE
COURT ISSUES
OR REGISTERS AN ORDER, CONTACT
THE AGENCY BELOW:**

**NYC LAW DEPT. - CORP. COUNSEL
FAMILY COURT DIVISION, UIFSA UNIT,
350 JAY ST, 9TH FLOOR, RENAISSANCE
PLAZA**

BROOKLYN, NY, 11201-2908

**FOR STATUS REQUESTS, AFTER AN
ORDER IS ISSUED
OR REGISTERED, CONTACT THE
AGENCY BELOW:
NYC OCSE/INTERSTATE UNIT
PO BOX 822, CANAL STREET STATION**

NEW YORK, NY, 10013

Address, FIPS Code

Phone: 718-643-5810 /

Fax: 718-643-5074

Phone & Extension

Phone: 718-222-2342

Fax: 718-222-2372 /

Phone: 888-208-4485

Fax: 212-487-8160/80

Date

Person Completing Form (first, middle, last)

Telephone Number & Extension

Fax

E-mail

District 66 NEW YORK CTY Non-Custodial Parent (NCP) Name (Last,First) SSN DOB Father
 CAN Custodial Parent (CP) SEARCH
 Child CLEAR
 BASIC
 <<SEARCH

Employer/Income Payor Name FEIN Statewide
 NCP Employer CP Employer

Search Targets: WRTS SSN Name Child PFR SDNH CAN UCMS Employer Check-All UnCheck-All
 Var. Ind. IEX Ind.

Advanced Search Function

Instructions: For best performance, limit search targets to your requirements. A series of searches will be executed based on your selections. The fewer searches the system performs, the faster the results.

WRTS: Compares the SSN of the NCP and/or CP and/or child to the Welfare Reporting and Tracking System database.

SSN: Compares the Social Security Number of the NCP and/or CP to the Child Support Management System (CSMS) database.

Name: Compares the name of NCP and/or CP to the CSMS database.

Child: Compares the child's name and/or SSN and/or date of birth (DOB) to the CSMS database. At least one name or an SSN is required.

PFR: Compares the name and/or the SSN and date of birth (DOB) of the father; and/or the name and/or SSN and DOB of the mother; and/or the name and/or DOB of the child to the Putative Father Registry. At least one name or one SSN is required.

SDNH: Compares the SSN of the NCP to the NY State Directory of New Hires.

CAN: Compares the District and Client Assistance Number (CAN) to the CSMS CAN database. The CSMS CAN database is populated with information from WMS.

UCMS: Compares the name and/or SSN of the CP to the Universal Case Management System (UCMS) database.

Employer: Compares user input to the CSMS database for NCP or CP Employer, either for the user's district or statewide. Requires the E/JP name and/or the Federal Employer Identification Number (FEIN). Other inputs for verification and IEX indicators can be used to refine search results.

See Help on Page from the Help menu for a complete explanation of Advanced Search Features.

District: 66 NEW YORK CITY Non-Custodial Parent (NCP)
 CAN Custodial Parent (CP)
 Child
 Employer/Income Payer
 Ver. Ind. IEX Ind.
 NCP Employer CP Employer
 Statewide
 Name (Last,First) SSN DOB Father SEARCH
 CLEAR
 BASIC
 <<SEARCH>

Search Targets: WRTS SSN Name Child PFR SDNH CAN UCMS Employer Check-All Uncheck-All

Advanced Search Results

A series of searches have been executed using the criteria you entered. Access results from each of the following searches by clicking on any of the links at the bottom of this page. NOTE: The number of matches found for each search appears to the right of the search name.

- WRTS:** Compares the SSN of the NCP and/or CP and/or child to the Welfare Reporting and Tracking System database. Access any available matches by clicking on WRTS link, below.
- SSN:** Compares the Social Security Number of the NCP and/or CP to the Child Support Management System (CSMS) database. Access any available matches by clicking on the SSN link, below.
- Name:** Compares the name of NCP and/or CP to the CSMS database. Access any available matches by clicking on the Name link, below.
- Child:** Compares the child's name and/or SSN and/or date of birth (DOB) to the CSMS database. At least a name or an SSN is required. Access any available matches by clicking on the Child link, below.
- PFR:** Compares the name and/or the SSN and date of birth (DOB) of the father; and/or the name and/or SSN and DOB of the mother; and/or the name and/or DOB of the child to the Putative Father Registry. At least one name or one SSN is required. Access any available matches by clicking on the PFR link, below.
- SDNH:** Compares the SSN of the NCP to the NY State Directory of New Hires. Access any available matches by clicking on the SDNH link, below.
- CAN:** Compares the District and Client Assistance Number (CAN) to the CSMS CAN database (CSMS CAN database is populated with information from WMS). Access any available matches by clicking on the CAN link, below.

District 66 NEW YORK CITY Non-Custodial Parent (NCP) Name (Last,First) SSN DOB Father

CAN Custodial Parent (CP) Child SEARCH CLEAR <<SEARCH

Employer/Income Payor Name FEIN Statewide

Ver. Ind. IEX Ind. @ NCP Employer CP Employer

Search Targets: WRTS SSN Name Child PFR SDNH CAN UCMS Employer Check-All Uncheck-All

WRTS Search Results

CAN	Suffix	District	Case Type	Case Type Description	Case Status Code	Case Status Description	Reason Code	Reason Description
	01	66	16	Safety Net FMP Cash Assistance...	15	Rejected/ Denie...	245	Refuses NYSES Referral
	02	66	11	Family Assistance	14	Closed	G96	Client Request - PA Only Verba...
	01	66	31	Non-Public Assistance Suppleme...	15	Rejected/ Denie...	V21	Failure to Provide Verificatio...
	01	66	20	Medical Assistance	10	Active	H66	Opening Code for MAGI Consumer...
	01	66	20	Medical Assistance	14	Closed	E35	Excess Unearned Income - No TM...
	01	66	20	Medical Assistance	15	Rejected/ Denie...	U13	Failure to Comply With Recerti...

6 items found, displaying 1 to 6

Welfare Reporting Tracking System (WRTS) Case Information

District: 66 NEW YORK CITY CAN: Suffix: 01 Public Assistance From: To: Application Date:

Case Type: 16 Safety Net RFP Cash Assistance (SN-CSH) Food Stamps: Medical Assistance: No. of Parents in Household: 0

Case Status: 15 Rejected/ Denied Case Participants Case Payments Case Address PICK LIST

Case Participants

CIN	SSN	Name (First MI Last)	Gender	Relationship	Birth Date	Individual Status	Medical	Actv.
			F	None		FS-Rejected/Denied, PA-Rejected/Denied		SEARCH
			F			MA-Rejected/Denied PA-Closed, FS-Closed		SEARCH

2 items found, displaying 1 to 2

Individual Status History

CAN: _____

CIN: _____

Name: _____

Individual Status Code	Individual Status	From Date	To Date	Reason Code	Reason
11	MA-Rejected/Denied				
11	PA-Rejected/Denied				
11	FS-Rejected/Denied				
20	FS-Closed				
20	PA-Closed				
07	PA-Active (Include Individuals Sanctioned Prorata)			G6	Other Reason
07	FS-Active (Include Individuals Sanctioned Prorata)			LL	Meets Eligibility Requirements
20	PA-Closed				
20	FS-Closed				
07	PA-Active (Include Individuals Sanctioned Prorata)			H5	Other
07	FS-Active (Include Individuals Sanctioned Prorata)			LL	Meets Eligibility Requirements

Welfare Reporting Tracking System (WRTS) Case Information

District: 66 NEW YORK CITY CANV Suffix: 01 Public Assistance From: To: Application Date: / /
 Case Type: 16 Safety Net FNP Cash Assistance (SN-CSH) Food Stamps No. of Parents in Household: 0
 Case Status: 15 Rejected/ Denied Medical Assistance [PICK LIST](#)

Case Payments

Payment Type: Child Support Qualifying Payments Payment Type Code: Issuance Begin Date:
 All Payments Issuance End Date:

Payment Type Code	Payment Type	Amount	Issuance Date	Payment From Date	Payment To Date	Case Type	Payment Status	Special Claim Code
05	Case Recurring Grant	\$68.50				Safety Net FNP Cash Assistance (SN-CSH)	Redeemed	
05	Case Recurring Grant	\$68.50				Safety Net FNP Cash Assistance (SN-CSH)	Redeemed	
05	Case Recurring Grant	\$68.50				Safety Net FNP Cash Assistance (SN-CSH)	Redeemed	
05	Case Recurring Grant	\$68.50				Safety Net FNP Cash Assistance (SN-CSH)	Redeemed	
05	Case Recurring Grant	\$68.50				Safety Net FNP Cash Assistance (SN-CSH)	Redeemed	

Total Payment Amount \$1,632.00

In the Court of Common Pleas of Berks County, Pennsylvania

)	Order Number:
Plaintiff)	
vs.)	PACSES Case Number:
)	Docket Number:
Defendant)	Other State ID Number:

ORDER OF COURT

Final Interim Modified

AND NOW, _____, based upon the Court's determination that the Payee's monthly net income is \$ 3,036.63 and the Payor's monthly net income is \$ 1,644.58, it is hereby ordered that the Payor pay to the Pennsylvania State Collection and Disbursement Unit, Five hundred thirty Five and 79/100

Dollars (\$535.79) a month payable monthly as follows: first payment due IMMEDIATELY.

The effective date of the order is _____

Arrears set at to be set as of _____ are due in full IMMEDIATELY.

All terms of this Order are subject to collection and/or enforcement by contempt proceedings, credit bureau reporting, tax refund offset certification, passport denial certification, driver's / professional / recreational license revocation, interception of lottery winnings, and the freeze and seize of financial assets. These enforcement/collection mechanisms will not be initiated as long as obligor does not owe overdue support. Failure to make each payment on time and in full will cause all arrears to become subject to immediate collection by all the means listed above. For the Support of:

Name

Birth Date

CERTIFIED TO BE A TRUE
AND CORRECT COPY OF
ORIGINAL

SIGNATURE

DOMESTIC RELATIONS
COUNTY OF BERKS
RECEIVED

PACSES Case Number

The defendant owes a total of \$ 535.79 per month payable monthly \$485.79 for current support and \$ 50.00 for arrears. The defendant must also pay fees/costs as indicated below. This order is allocated and monies are to be applied as follows:

Frequency Codes: 1=One Time M=Monthly

Payment Amount/ Frequency	Debit Type Description	Beneficiary
\$ 242.89	MCS Alloc MOD	
\$ 242.90	MCS Alloc MOD	
\$ /		
\$ /		
\$ /		
\$ /		
\$ /		
\$ /		
\$ /		
\$ /		

Said money to be turned over by the PA SCDU for distribution and disbursement in accordance with Rule 1910.17(d).

Payments must be made by check or money order. All checks and money orders must be made payable to PA

SCDU and mailed to: PA SCDU
PO BOX 69110
HARRISBURG, PA 17106

Payments must include the defendant's PACSES Member or Social Security Number in order to be processed. Do not send cash by mail.

The monthly support obligation includes cash medical support in the amount of \$250.00 annually for unreimbursed medical expenses incurred for each child and/or spouse. Unreimbursed medical expenses of the obligee or children that exceed \$250 annually shall be allocated between the parties. The party seeking unreimbursed medical expenses must provide documentation of expenses to the other party no later than March 31st of the year following the calendar year in which the final medical bill to be allocated was received. The unreimbursed medical expenses are to be paid as follows: 35 % by defendant and 65 % by plaintiff.

Plaintiff to provide medical insurance

Within thirty (30) days after the entry of this order, the Plaintiff Defendant shall submit to the other party and to the domestic Relations Section written proof that medical insurance coverage has been obtained or that application for coverage has been made. Proof of coverage shall consist, at a minimum, of: 1) the name of the health care coverage provider(s); 2) any applicable identification numbers; 3) any cards evidencing coverage; 4) the address to which claims should be made; 5) a description of any restrictions on usage; such as prior approval for hospital admissions, and the manner of obtaining approval; 6) a copy of the benefit booklet or coverage contract; 7) a description of all deductibles and co-payments; and 8) five copies of any claim forms.

Other Conditions:
 (1) Defendant's obligation to contribute to the orthodontic expenses of child is \$1,137.60. This amount shall be added to his arrears.

(2) Defendant agreed to this order by phone

Defendant shall pay the following fee: (PER DRO RECORDS) which was recorded

<u>Fee Total</u>	<u>Fee Description</u>	<u>Payment Frequency</u>
\$	for	Payable at \$ per YEAR
\$	for	Payable at \$ per one time
\$	for	Payable at \$ per one time
\$	for	Payable at \$ per
\$	for	Payable at \$ per

IMPORTANT LEGAL NOTICE

PARTIES MUST WITHIN SEVEN DAYS INFORM THE DOMESTIC RELATIONS SECTION AND THE OTHER PARTIES, IN WRITING, OF ANY MATERIAL CHANGE IN CIRCUMSTANCES RELEVANT TO THE LEVEL OF SUPPORT OR THE ADMINISTRATION OF THE SUPPORT ORDER, INCLUDING, BUT NOT LIMITED TO, LOSS OR CHANGE OF INCOME OR EMPLOYMENT AND CHANGE OF PERSONAL ADDRESS OR CHANGE OF ADDRESS OF ANY CHILD RECEIVING SUPPORT. A PARTY WHO WILLFULLY FAILS TO REPORT A MATERIAL CHANGE IN CIRCUMSTANCES MAY BE ADJUDGED IN CONTEMPT OF COURT, AND MAY BE FINED OR IMPRISONED.

PENNSYLVANIA LAW PROVIDES THAT ALL SUPPORT ORDERS SHALL BE REVIEWED AT LEAST ONCE EVERY THREE (3) YEARS IF SUCH A REVIEW IS REQUESTED BY ONE OF THE PARTIES. IF YOU WISH TO REQUEST A REVIEW AND ADJUSTMENT OF YOUR ORDER, YOU MUST DO THE FOLLOWING: CALL YOUR ATTORNEY. AN UNREPRESENTED PERSON WHO WANTS TO MODIFY (ADJUST) A SUPPORT ORDER SHOULD CONTACT THE DOMESTIC RELATIONS SECTION.

ALL CHARGING ORDERS FOR SPOUSAL SUPPORT AND ALIMONY PENDENTE LITE, INCLUDING UNALLOCATED ORDERS FOR CHILD AND SPOUSAL SUPPORT OR CHILD SUPPORT AND ALIMONY PENDENTE LITE, SHALL TERMINATE UPON DEATH OF PAYEE.

A MANDATORY INCOME ATTACHMENT WILL ISSUE UNLESS THE DEFENDANT IS NOT IN ARREARS IN PAYMENT IN AN AMOUNT EQUAL TO OR GREATER THAN ONE MONTHS SUPPORT OBLIGATION AND (1) THE COURT FINDS THAT THERE IS GOOD CAUSE NOT TO REQUIRE IMMEDIATE INCOME WITHHOLDING; OR (2) A WRITTEN AGREEMENT IS REACHED BETWEEN THE PARTIES WHICH PROVIDES FOR AN ALTERNATE ARRANGEMENT.

UNPAID ARREARAGE BALANCES MAY BE REPORTED TO CREDIT AGENCIES, ON AND AFTER THE DATE IT IS DUE, EACH UNPAID SUPPORT PAYMENT SHALL CONSTITUTE, BY OPERATION OF LAW, A JUDGMENT AGAINST YOU, AS WELL AS A LIEN AGAINST REAL PROPERTY.

IT IS FURTHER ORDERED that, upon payor's failure to comply with this order, payor may be arrested and brought before the Court for a Contempt hearing; payor's wages, salary, and commissions and/or income may be attached in accordance with law; this Order will be increased without further hearing by 15% a month until all arrearages are paid in full. Payor is responsible for court costs and fees.

Copies delivered to parties
Consented:

Plaintiffly
Defendant needs eqv suit 10h

Plaintiff

Plaintiff's Attorney

Defendant

Defendant's Attorney

BY THE COURT:

Date

JUDGE

CSMS 11B CASES WITH PAYMENT DUE THIS MONTH AND 21A SUP OBLIGATION=0 AND CASE STATUS=1
 FCS832 REPORT1

S. NO	CSMS NUMBER	LEDG1 TYPE	ST	DEB1 AMOUNT	OBLI FRQ	FIRST PAY DUE	WA STAT	CASE TYPE	CASE STAT	STP CHG DAT	DSW
1	22A	01	01	\$0.00	M01		09	11	1		1
	21A	01	01	\$0.00	M07						
	11B	01	01	\$395.00	M01						
2	22AJ12	01	01	\$0.00	M07						
	22AJ11	01	01	\$0.00	M01						
	22AJ12	01	01	\$0.00	M07						
	22AJ11	01	01	\$0.00	M01						
	11B	01	01	\$70.00	M12	07		11	1		1
3	31CA	03	03	\$0.09	D14						
	21A	01	01	\$0.00	M12						
	12B	03	03	\$0.00	M12						
4	21A	01	01	\$0.00	M01	07		11	1		1
	11B	01	01	\$40.00	M01						
5	22AR	03	03	\$0.00	M01		07	11	1		1
	21A	01	01	\$0.00	M01						
	11B	01	01	\$50.00	M01						
	22AJ11	01	01	\$0.00	M01						
	22AJ11	01	01	\$0.00	M01						
	21A	01	01	\$0.00	M01		07	11	1		1
7	11B	01	01	\$25.00	M01		07	11	1		1
	21A	01	01	\$0.00	M01						
	11B	01	01	\$25.00	M01		20	11	1		1
8	22AR	01	01	\$0.00	D07						
	11B	01	01	\$195.00	D14	07		11	1		1
	21A	01	01	\$0.00	D14						

CSMS_00000780_288176[1]

STATE OF NEW YORK-DSS 2529
AS OF

NEW YORK CITY

PAGE 380

IVA-TV0 INTERFACEA6688

** CHILD SUPPORT ENFORCEMENT **

WMS CLOSINGS/POSSIBLE DECONVERSIONS
ALL CHILDREN IN CSMS CLOSED IN WMS

CASE#	CAN	SUFF	CIN	NAME	CASE REASON	IND REASON
A		1				
A		1			Y95	**
A		1			Y95	**
A		1			EG5	**
A		1			G88	**
A		1			Y67	**
A		1			F6	**
A		1			Y99	**

Worker Alerts

IVA-IVD Overage CANS

IVA - IVD Interface

Count Only District 66 NEW YORK CITY Worker Code Comment: 08 DSSW: 1 TO 3 - SYS GEN
 Case ID CAN CIN Alert Status Open & In Process SEARCH CLEAR
 Delete Defaults

Worker Code	ID	CAN	Suffix	CIN	Name	Comment	New CIN	IV-A Report Data	Alert Status
AF1A	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	013 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	035 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	037 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	064 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	040 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	054 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN
AYMS	A		1	NO-AP-PY		08 DSSW 1 TO 3 - SYS GEN	SUFFIX 1	017 ...	OPEN

UPDATE

OCSE Web Deconversion
Sample 4

FISCAL1-FR
CASES WITH OPEN SN LEDGER AND NO CHILD ON PA

Page :1

ACCT NO	UNLDATE	DISBCYDSS	DISBCYPET	DISBCMDSS	DISBCMPET	CYPAID	CMPAID
		0.00	0.00	0.00	0.00	4218.00	4218.00
		2706.00	0.00	2706.00	0.00	2706.00	2706.00
		1612.50	5620.00	600.00	1900.00	7232.50	2500.00
		4080.00	0.00	1680.00	0.00	4080.00	1680.00
		4530.63	0.00	1671.09	0.00	4530.63	1671.09
		1617.52	0.00	1617.52	0.00	1617.52	1617.52
		2450.00	0.00	1400.00	0.00	2450.00	1400.00
		3951.00	0.00	1317.00	0.00	3951.00	1317.00
		5950.00	0.00	995.00	0.00	5950.00	1050.00
		2949.50	3123.00	520.50	520.50	6072.50	1041.00
		2424.57	4623.00	753.75	251.25	7236.00	1005.00
		2678.61	0.00	999.00	0.00	2657.26	999.00
		2430.00	0.00	990.00	0.00	2430.00	990.00
		986.00	0.00	986.00	0.00	986.00	986.00
		1041.07	0.00	956.38	0.00	1041.07	956.38
		429.00	1474.85	429.00	374.85	1942.85	842.85
		3875.00	0.00	550.00	0.00	4550.00	825.00
		6987.00	0.00	822.00	0.00	6987.00	822.00
		972.00	0.00	810.00	0.00	972.00	810.00
		1521.60	0.00	760.80	0.00	1521.60	760.80
		1137.70	0.00	736.23	0.00	1137.70	736.23
		5994.00	0.00	999.00	0.00	6319.91	721.50
		4745.47	0.00	676.33	0.00	4701.97	676.33
		4672.50	0.00	667.50	0.00	4672.50	667.50
		5304.00	0.00	663.00	0.00	5304.00	663.00
		2112.00	0.00	660.00	0.00	2112.00	660.00
		1913.00	1376.00	438.00	220.00	3289.00	658.00
		5232.00	0.00	654.00	0.00	5232.00	654.00
		1792.00	3328.00	640.00	0.00	5120.00	640.00
		1466.73	0.00	637.50	0.00	1466.73	637.50
		4305.00	0.00	615.00	0.00	4806.46	615.00
		3654.00	0.00	609.00	0.00	3451.00	609.00
		5100.00	0.00	750.00	0.00	4950.00	600.00

OCSE Emancipation List
Sample 5

ACCOUNTS WITH STOP CHARGE DATES OF NEXT MONTH - FC5740 REPORT1

Page:11

S. NO	ACCT. NO.	RESPONDENT NAME	CLIENT NAME	LEDG TYPE	ST	OBLI AMT	OBLI FRQ	STP CHG DAT	LAST PAY DATE	DSW	FIPS
1				11B	01	\$25.00	M08			38	136047
				12BR	03	\$0.00	D07				
2				11B	01	\$33.00	M28			08	136061
				21A	01	\$0.00	M28				
				22AR	03	\$0.00	M25				
				31CA	03	\$0.00	B				
3				11B	01	\$66.00	D07			05	136061
				21A	01	\$0.00	D07				
				22AR	03	\$0.00	D07				
4				11B	01	\$276.00	B			05	136047
				11CB	01	\$59.58	B				
				11CO	01	\$119.17	B				
				12B	03	\$0.00	B				
5				11B	01	\$0.00	M29			08	136061
				21A	03	\$0.00	D07				
				21BE	01	\$50.00	M29				
				21BR	01	\$0.00	D07				
				22A	03	\$0.00	M23				
6				11B	01	\$653.34	M18			05	136081
				12B	03	\$0.00	D14				
7				11B	01	\$55.00	M31			11	136047
				12BJ1	01	\$0.00	M20				
				12BJ2	03	\$0.00	M20				
				12BJ1	01	\$0.00	M20				
				12BJ2	03	\$0.00	M20				
				21A	01	\$0.00	M31				
				21BR	03	\$0.00	M31				

OCSE Web SA Indicator
Sample 5

SUPPORT GUIDELINES ERROR ACCOUNTS ORDERS <= \$25 PER MONTH - SA INDICATOR <= \$25 NOR V25 Page :1

S.NO	ACCT. NO.	LEDG1 TYPE	ST	OBLG. AMOUNT	OBL FRQ	SA IND	NETDUE	RESP
1		11B	01	\$25.00	M01	U08	-178.16	
		21BR	03	\$0.00	M01			
		22BR	03	\$0.00	M19			
2		11B	01	\$0.00	B	U08	516.71	
		21A	01	\$25.00	M20			
		21BR	02	\$0.00	B			
		22A	03	\$0.00	M23			
3		11B	01	\$25.00	M01	U08	-46.24	
		21A	01	\$0.00	M01			
		22A	03	\$0.00	M01			
4		11B	01	\$25.00	M22	U08	-375.00	
		21BR	01	\$0.00	M22			
		22BR	03	\$0.00	M22			
5		11B	01	\$1.00	D07	U08	36908.79	
		21A	01	\$71.00	D07			
6		11B	01	\$6.40	M15	JCL	-41.76	
		21A	01	\$0.00	M15			
		21BR	01	\$0.00	M15			
		22A	03	\$0.00	M15			
		31CA	03	\$0.00	M07			
7		11B	01	\$0.00	M01	JCL	5413.71	
		11CA	01	\$8.33	M01			
		21A	01	\$8.33	M01			

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STATE OF NEW YORK-DSS 2525 NEW YORK CITY
AS OF
ASCU270 *** SUPPORT COLLECTION UNIT ***

ACTION LISTING		A66	EX	FIPS	ACCOUNT	ASCU ACTION LISTING	
TYPE	TKL/DQ/EF/TX		ID0	#	NUMBER	TICKLER	RESPONDENT NAME
TICKLER DATE REACHED			7	2		ID	DELINQ SWITCH
= 08						IE	DELINQ SWITCH
= 05			3			IE	DELINQ SWITCH
= 04			3			ID	DELINQ SWITCH
= 00			7			IE	DELINQ SWITCH
= 08						ID	DELINQ SWITCH
= 00			3			IE	DELINQ SWITCH
= 08			3			IE	DELINQ SWITCH
= 07			3			IE	DELINQ SWITCH
= 19			3			IE	DELINQ SWITCH
= 05			3			IE	DELINQ SWITCH
= 01			3			IE	DELINQ SWITCH
= 00			3			IE	DELINQ SWITCH
= 05			3			IE	DELINQ SWITCH
= 05			3			IE	DELINQ SWITCH
= 38			3			IE	DELINQ SWITCH
=			3			IE	DELINQ SWITCH