



George E. Pataki
Governor

NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE
40 NORTH PEARL STREET
ALBANY, NEW YORK 12243-0001

Brian J. Wing
Commissioner

: INFORMATIONAL LETTER :

TRANSMITTAL: 98 INF-11

TO: Commissioners of
Social Services

DIVISION: Temporary
Assistance

DATE: August 14, 1998

SUBJECT: Revision to Public Assistance ABEL Budget Narratives
(DSS-3951, DSS-3952, DSS-3953, DSS-3954) (Rev. 12/97)

SUGGESTED

DISTRIBUTION: Income Maintenance Directors
Forms Coordinators
Staff Development Coordinators

CONTACT PERSON: Region I-(518) 473-0332; Region II-(518) 474-9344;
Region III-(518) 474-9307; Region IV-(518) 474-9300;
Region V-(518) 473-1469; Region VI-(212) 383-1658

ATTACHMENTS: Attachment I - DSS-3951: Public Assistance Budget
Benefit Narrative - not available
on-line
Attachment II - DSS-3952: Public Assistance Excess
Gross Income Narrative - not
available on-line
Attachment III - DSS-3953: Public Assistance Excess
Net Income Narrative - not
available on line
Attachment IV - DSS-3954: Public Assistance Lump
Sum Ineligibility Narrative - not
available on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
92 ADM-20	92 INF-37	355.1(a)(3)		PASB	
88 ADM-37		355.3(a)(1)		VI-B-all	
81 ADM-55		358.9(b)		VI-D-all	
92 INF-37		387.20(b)		XII-C-all	
89 INF-53					

The purpose of this release is to introduce the revised (12/97) Public Assistance ABEL Budget Narratives:

- DSS-3951: Public Assistance Budget Benefit Narrative
- DSS-3952: Public Assistance Excess Gross Income Narrative
- DSS-3953: Public Assistance Excess Net Income Narrative
- DSS-3954: Public Assistance Lump Sum Ineligibility Narrative

As mandated by 88 ADM-37, upstate local districts are required to provide a copy of the appropriate printed Public Assistance ABEL Budget Narrative to a public assistance applicant or recipient whenever a copy of their public assistance ABEL budget is presented to them.

The primary revision included in the 12/97 versions reflects welfare reform changes and in particular, the change in the earned income disregard.

Listed below is a detailed summary of all the changes which were incorporated into this revision.

I. DSS-3951

- A. The revision date was **changed** to (12/97).
- B. The PA Budget Screen section at the top of the page was updated to accurately reflect the existing computer screens.
- C. In Section 1, the last sentence was deleted because people who are sanctioned can be included in the case count.
- D. Under **Section 2**, the "supplemental child care" sentence was **deleted**.
- E. In **Section 4**:
 - 1. In the second sentence, the word "except" was changed to "however" and before the word "noted", "is" was added.
 - 2. The third and fourth sentences were **changed** to read:

The top two lines of Section 4 contain coded information about which case member receives income (LN), if there is a work deduction (301 and 30M), the source of the income (SRC), how often the income is received (FRQ) and if the job is full or part time (D).
 - 3. The "CH Care" instructions were **changed** to read:

This field is only for budgets prior to 10-01-97. It reflects a formerly allowable deduction to persons who paid child care so that they could work.
 - 4. "\$30 & 1/3 - \$30" was **changed** to "DISREGARD" and "for a limited period of time" was **deleted** from the explanation.

II. DSS-3952

- A. The revision date was **changed** to (12/97).
- B. The PA Budget Screen section at the top of the page was updated to accurately reflect the existing computer screens.
- C. The first paragraph under the PA Budget Screen was changed to read:

THE PUBLIC ASSISTANCE (PA) BUDGET ABOVE SHOWS HOW FINANCIAL DATA HAS BEEN USED TO CALCULATE YOUR INELIGIBILITY FOR PUBLIC ASSISTANCE. A PA HOUSEHOLD IS NOT ELIGIBLE FOR A GRANT IN A MONTH IN WHICH THE HOUSEHOLD'S TOTAL GROSS INCOME EXCEEDS THE GROSS LIMIT. ALL ENTRIES ARE PER MONTH. THE LAST TWO NUMBERS OF ANY NUMBER AMOUNT ARE CENTS. YOUR CASE HAS BEEN DENIED, TERMINATED OR SUSPENDED BECAUSE YOUR GROSS COUNTABLE INCOME EXCEEDS THE GROSS INCOME LIMIT.

- D. In Section 1, the last sentence was deleted because people who are sanctioned can be included in the case count.
- E. Under Section 2, the "Supplemental Child Care" sentence was **deleted**.
- F. Section 6, was changed to read:

This is a summary of Sections 2, 3, and 4. The amount next to "GROSS LIMIT" is the allowable Gross Income Limit for your family size. "TOTAL INC" is the sum of Sections 3 and 4. "CD/AMT" shows the Code "S" for surplus and the amount by which the total income exceeds the Gross Income Limit.

III. DSS-3953

- A. The revision date was **changed** to (12/97).
- B. The PA Budget Screen section at the top of the page was updated to accurately reflect the existing computer screens.
- C. In Section 1, the last sentence was deleted because people who are sanctioned can be included in the case count.
- D. Under Section 2, the "supplemental child care" sentence was **deleted**.
- E. In Section 4:
 - 1. In the second sentence, the word "except" was changed to "however" and before the word "noted", "is" was added.

2. The third and fourth sentences were **changed** to read:

The top two lines of Section 4 contain coded information about which case member receives income (LN), if there is a work deduction (301 and 30M), the source of the income (SRC), how often the income is received (FRQ) and if the job is full or part time (D).

3. The "CH Care" instructions were **changed** to read:

This field is only for budgets prior to 10-01-97. It reflects a formerly allowable deduction to persons who paid child care so that they could work.

4. "\$30 & 1/3 - \$30" was **changed** to "DISREGARD" and "for a limited period of time" was deleted from the explanation.

IV. DSS-3954

- A. The revision date was **changed** to (12/97).

- B. The PA Budget Screen section at the top of the page was updated to accurately reflect the existing computer screens.

- C. In Section 1, the last sentence was deleted because people who are sanctioned can be included in the case count.

- D. In **Section 4:**

1. In the second sentence, the word "except" was changed to "however" and before the word "noted", "is" was added.

2. The third and fourth sentences were **changed** to read:

The top two lines of Section 4 contain coded information about which case member receives income (LN), if there is a work deduction (301 and 30M), the source of the income (SRC), how often the income is received (FRQ) and if the job is full or part time (D).

3. The "CH Care" instructions were **changed** to read:

This field is only for budgets prior to 10-01-97. It reflects a formally allowable deduction to persons who paid child care so that they could work.

4. "\$30 & 1/3 - \$30" was **changed** to "DISREGARD" and "for a limited period of time" was deleted from the explanation.

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Delivery of the revised Public Assistance ABEL Budget Narratives to the Albany Warehouse is expected in September, 1998. Your district will not automatically receive copies.

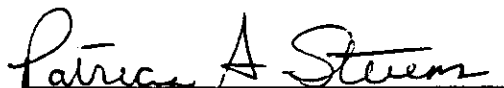
In order to ensure that usage of these revised forms begins within a reasonable amount of time, you may continue to use the previous versions until your stocks are depleted, or until November, 1998, whichever occurs first. Reorders of these forms will be filled with 12/97 versions.

Local Equivalent Forms - All requests for approval of local equivalent forms must be submitted in accordance with the procedures described in 89 INF-53 and pages 12-1 through 12-5 of the Local District Manager's Guide.

Future requests for any of these forms should be submitted on Form DSS-876(Rev.2/96): "Request for Forms or Publications", and should be sent to:

Office of Temporary and Disability Assistance
Document Services
P.O. Box 1990
Albany, New York 12201

Questions concerning ordering forms should be directed to the Document Services by calling 1-800-343-8859, ext. 4-2702.


Patricia A. Stevens
Deputy Commissioner
Division of Temporary Assistance

PUBLIC ASSISTANCE BUDGET BENEFIT NARRATIVE

NEW YORK STATE

OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE

WBGTPA		**PA BUDGET**				VERSION			DIST		/ /		CASE IVD						
CASE NAME		CASE NO:				OFC UNIT		WRKR	TRAN	CASE		IVD							
HH	CA	DP-HH	DP-CA	HC	FST	NR	PI	SI	LIV	*****EARNED INCOME*****									
TY	R	ACTUAL		ALLOW		*****OTHER INCOME*****		LN	SRC	F	AMOUNT	EXEMPT	30I	30M	SRC	FRQ	D	CCR	
BASIC				0	0														
ENRGY				0	0														
SPMNT				0	0														
SHELT				0	0														
WATER				0	0														
FUEL				0	0														
OTHER				0	0														
OTHER				0	0														
OTHER				0	0														
TOTAL NEEDS				0	0														
*****RECOUPMENT*****										CD / AMT D									
TY	BALANCE	%	MO	AMT	REM	RECOUPMENT													
	0	00.0		0	0	UTIL / RES													
	0	00.0		0	0	SHELT/RES													
	0	00.0		0	0	RESTRICTED													
RECALC	00.0			0	0	CASH GRANT													
FS	CASE NO.					SEMI													
										TOTAL NET		0	0						
										\$\$\$\$PA GRANT\$\$\$\$		0	0						
										TOTAL NEEDS		0	0						
										TOTAL INC		0	0						
										CH CARE		0	0						
										CH CARE		0	0						
										DISREGARD		0	0						
										TOT DED		0	0						
										UNAVAIL		0	0						
										NET INC		0	0						
										*****EFFECTIVE DATE*****									
										TO									
										DATE STORED									

THE PUBLIC ASSISTANCE (PA) BUDGET ABOVE SHOWS HOW FINANCIAL DATA HAS BEEN USED TO CALCULATE THE AMOUNT OF YOUR GRANT. ALL ENTRIES ARE PER MONTH. THE LAST TWO NUMBERS OF ANY MONEY AMOUNT ARE CENTS.

Section 1: The top part of the form identifies this as a PA budget for your household (CASE NAME). The number appearing under "CA" includes those persons who are applying for assistance. It may also include, under certain circumstances, non-applying person(s) living with you who have legal responsibility for any person(s) who are applying. It does not include any person(s) living with you who are receiving a separate grant of assistance.

Section 2: This is a summary of your family's needs, as determined by statewide schedules of need. These schedules are known as the "Standard of Need". In the "ACTUAL" column is the amount of rent, water, etc., which you reported as actually being paid. In the "ALLOW" column is the amount which is being used to calculate your budget. The amounts in this column which appear next to "BASIC", "ENRGY", "SPMNT", and "SHELT" and "FUEL" are determined by the number of persons in your PA case. The BASIC amount is intended for use in meeting essential needs common to all households such as food, clothing, and non-heating electricity. The ENRGY and SPMNT amounts are for meeting domestic energy costs. The SHELT amount is intended to be used in paying for shelter expenses. The FUEL amount is intended to be used in paying for heating of your home. If any amounts are shown opposite the three fields labeled "OTHER", they represent additional allowances to which you may be entitled. If an "X" or "E" appears at the left of any of these items, that amount is being withheld from your cash grant and is being sent n a separate check. This separate check, depending on case circumstances and Local District procedures, is sent either to a vendor (landlord, utility company, etc.) or to you. The amount which appears next to "TOTAL NEEDS" is the sum of your total monthly needs (rounded down to the next whole dollar), based on the "Standard of Need".

Section 3: This is income received from a source other than a job. Some examples are Social Security Benefits, Unemployment Insurance Benefits, or Veteran's Benefits. In the "SRC" column is a code number for the source of the income which appears in the "AMOUNT" column. Income which appears "AMOUNT" column is reduced by the amount appearing in the "EXEMPT" column before it is budgeted against your PA needs.

Income Exclusions - Some money which you may have reported is not counted as income and does not appear on the budget. An example of this is income from Educational Grants and Loans.

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Section 4: This is income that you reported as being received from a job or through self-employment. (Usually the allowable costs of doing business are subtracted before being recorded on the budget for self-employment income: however, Income from Roomers or Boarders/Lodgers is noted in "EXEMPT" below.)-The top two lines of Section 4 contain coded information about which case member receives income (LN), if there is a work deduction (301 and 30M), the source of the income (SRC), how often the income is received (FRQ) and if the job is full or part-time (D). The total amount from each source of employment is entered in each column. The meaning of each category is:

"GROSS"	Gross income before any deductions. (This includes the Income of any person whose income we must count but who is sanctioned.)
"TAXES"	-These fields may display amounts only if the budget relates to a period prior to May 1, 1985. They show the total amount of Federal, State, NYC and Social Security (FICA) taxes, and NYS Disability Payments which would not be counted.
"WORK EXP"	-People with earned income receive a \$90 deduction. This deduction is not given when a recipient, without good cause, quits his job, reduces his earnings, refuses to accept employment or does not make a timely report of income.
"EXEMPT"	-If you have income from Roomers or Boarder/Lodgers, the amount that is considered exempt (cost of doing business) will be shown here.
"CH CARE"	-This field is only for budgets prior to 10-01-97. It reflects a formally allowable deduction to persons who paid child care so that they could work.
"DISREGARD"	-This is a special work incentive deduction which public assistance families with children may receive under specific circumstances.
"TOT DED"	-This is the sum of the total deductions listed above.
"UNAVAIL"	-This is the amount of net earned income which is applied against the needs of the persons included in another case
"NET INC"	-The Net Income is equal to the Gross Income minus the total deductions and unavailable amount.

Section 5: This section is completed only when the agency has determined that there has been an overpayment of benefits in the past. The amount under "BALANCE" is the total amount to be recouped as of the effective date of this budget. The "%" shows the percentage of "TOTAL NEEDS" being recouped. The number under "MO" is the number of months it will take to recoup the balance at the full ("AMT"). "AMT" is the amount which is recouped from this month's grant and is subtracted from the deficit "AMT" in Section 6. "REM" is the remainder of this balance that will be recouped in the final month of recoupment.

Section 6: This section is a summary of Sections 2,3,4,and 5. The amount next to "TOTAL NEEDS" is the total needs from Section 2. "TOTAL INC" is Sections 3 and 4 added together. The amount next to "CD/AMT" is equal to your total income subtracted from your total needs. The remainder is rounded down to the next whole dollar. The Code "D" or "W" next to "CD/AMT" shows that the budget is a deficit The recoupment form Section 5 and any amounts which are restricted are then subtracted from the "CD/AMT". The result is your monthly cash grant. If your deficit is less than \$10, you will not receive a cash grant. Next to "SEMI" are the amounts which are issued, twice each month.

Section 7: The "EFFECTIVE" DATE" represents the dates for which your budget is valid. However, additional changes in your circumstances may result in further changes to your budget during the time period covered by these dates.

Section 4: This is income that is received from a job or through self employment. (The allowable costs of doing business are subtracted before being recorded on the budget for self-employment income) No deductions from the gross income are allowed (except Roomer and Boarder/Lodger income exemptions) in the computation of the 185% test. (This includes the income for any person whose income we must count but who is sanctioned.) The gross income and net income are shown.

Section 5: The type and balance of any outstanding recoupment (overpayment) is shown

Section 6: This is a summary of Sections 2, 3, and 4. The amount next to "GROSS LIMIT" is the allowable Gross Income Limit for your family size. "TOTAL INC" is the sum of Sections 3, and 4. "CD/AMT" shows the Code "S" for surplus and the amount by which total income exceeds the Gross Income Limit.

Section 7: When a public assistance case is determined ineligible, this section displays the effective date of ineligibility.

PUBLIC ASSISTANCE EXCESS NET INCOME NARRATIVE

NEW YORK STATE										OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE									
WBGTPA **PA BUDGET**					VERSION					DIST / /									
CASE NAME					CASE NO:					OFC UNIT WRKR TRAN CASE IVD									
HH	CA	DP-HH	DP-CA	HC	FST	NR	PI	SI	LIV	#	LN	30I	30M	SRC	FRQ	D	CCR		
										*****EARNED INCOME*****									
TY	R	ACTUAL		ALLOW															
BASIC				0									390000		GROSS		④ 0		
ENRGY		② 0		0		*****OTHER INCOME*****							0		TAXES		④ 0		
SPMNT		0		0		LN SRC F AMOUNT EXEMPT							0		NYS DIS		0		
SHELT		0		0		③ 0 0							0		WORK EXP		0		
WATER		0		0									0		EXEMPT		0		
FUEL		0		0		TOTAL NET							0		CH CARE		0		
OTHER		0		0		\$\$\$\$PA GRANT\$\$\$							0		CH CARE		0		
OTHER		0		0		GROSS LIMIT							0		CH CARE		0		
OTHER		0		0		TOTAL INC							0		DISREGARD		0		
STATE STANDARD		0		0		CD / AMT S							0		TOT DED		0		
*****RECOUPMENT*****																			
TY	BALANCE	% MO	AMT	REM															
	0	00.0	0	⑤ 0	RECOUPMENT					⑥ 0									
	0	00.0	0	0	UTIL /RES					0									
	0	00.0	0	0	SHELT/RES					0									
	0	00.0	0	0	RESTRICTED					0									
RECALC	00.0		0		CASH GRANT					0									
FS CASE NO.																			
																		****EFFECTIVE DATE****	
																		TO	
																		DATE STORED / / ⑦	

THE PUBLIC ASSISTANCE (PA) BUDGET ABOVE SHOWS HOW FINANCIAL DATA HAS BEEN USED TO CALCULATE YOUR NET INCOME TO DETERMINE YOUR INELIGIBILITY FOR PUBLIC ASSISTANCE. ALL ENTRIES ARE PER MONTH. THE LAST TWO NUMBERS OF ANY MONEY AMOUNT ARE CENTS.

Section 1: The top part of the form identifies this as a PA budget for your household (CASE NAME). The number appearing under "CA" includes those persons who are applying for assistance. It may also include, under certain circumstances, non-applying person(s) living with you who have legal responsibility for any person(s) who are applying. It does not include any person(s) living with you who are receiving a separate grant of assistance.

Section 2: This is a summary of your family's needs, as determined by statewide schedules of need. These schedules are known as the "Standard of Need". In the "ACTUAL" column is the amount of rent, water, etc., which you reported as actually being paid. In the "ALLOW" column is the amount which is being used to calculate your budget. The amounts in this column which appear next to "BASIC", "ENRGY", "SPMNT", "SHELT" and "FUEL" are determined by the number of persons in your PA case. The BASIC amount is intended for use in meeting essential needs common to all households such as food, clothing, and non-heating electricity. The ENRGY and SPMNT amounts are for meeting domestic energy costs. The SHELT amount is intended to be used in paying for shelter expenses. The FUEL amount is intended to be used in paying for heating of your home. If any amounts are shown opposite the three fields labeled "OTHER", they represent additional allowances to which you may be entitled. The amount which appears next to "TOTAL NEEDS" is the sum of your total monthly needs (rounded down to the next whole dollar), based on the "Standard of Need".

Section 3: This is income received from a source other than a job. Some examples are Social Security Benefits, Unemployment Insurance Benefits, or Veteran's Benefits. In the "SRC" column is a code number for the source of the income which appears in the "AMOUNT" column. Income which appears "AMOUNT" column is reduced by the amount appearing in the "EXEMPT" column before it is budgeted against your PA needs.

Income Exclusions - Some money which you may have reported is not counted as income and does not appear on the budget. An example of this is income from Educational Grants and Loans.

Section 4: This is income that you reported as being received from a job or through self employment. (Usually the allowable costs of doing business are subtracted before being recorded on the budget for self-employment income; however, Income from Roomers or Boarders/Lodgers is noted in "EXEMPT" below.) The top two lines of Section 4 contain coded information about which case member receives income (LN), if there is a work deduction (30I and 30M), the source of the income (SRC), who often the income is received (FRQ) and if the job is full or part-time (D). The total amount from each source of employment is entered in each column. The meaning of each category is:

"GROSS"	Gross income before any deductions. (This includes the income of any person whose income we must count but who is sanctioned.)
"TAXES"	-These fields may display amounts only if the budget relates to a period prior to May 1, 1985. They show the total amount of
"NYS DIS"	Federal, State, NYC and Social Security (FICA) taxes, and NYS Disability Payments which would not be counted as income available to meet needs.
"WORK EXP"	-Person(s) with earned income receive a \$90 deduction. This deduction is not given when a recipient, without good cause, quits his job, reduces his earnings, refuses to accept employment or does not make a timely report of income.
"EXEMPT"	-If you have income from Roomers or Boarder/Lodgers, the amount that is considered exempt (cost of doing business) will be shown here.
"CH CARE"	-This field is only for budgets prior to 10-01-97. It reflects a formally allowable deduction to persons who paid child care so that they could work.
"DISREGARD"	-This is a special work incentive deduction which public assistance families with children may receive under specific circumstances.
"TOT DED"	-This is the sum of the total deductions listed above.
"UNAVAIL"	-This is the amount of net earned income which is applied against the needs of the persons included in another case
"NET INC"	-The Net Income is equal to the Gross Income minus the total deductions and unavailable amount.

Section 5: The type and balance of any outstanding recoupment (overpayment) is shown.

Section 6: This section is a summary of Sections 2, 3, 4, and 5. The amount next to "TOTAL NEEDS" is the total needs from Section 2. "TOTAL INC" is Sections 3, and 4 added together. The amount next to "CD/AMT" is equal to your total income subtracted from your total income. The Code "S" next to "CD/AMT" shows that the budget is a surplus and the amount by which total income exceeds total needs. Therefore, your case is ineligible for assistance.

Section 7: When a PA case is determined ineligible, the effective date of ineligibility is displayed in this field.

PUBLIC ASSISTANCE LUMP SUM INELIGIBILITY NARRATIVE

NEW YORK STATE

OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE

WBGTPA		**PA BUDGET**		VERSION		DIST		/ /	
CASE NAME		CASE NO:		1		OFC UNIT		WRKR	
HH	CA	DP-HH	DP-CA	HC	LF	FST	NR	PI	SI
LIV		*****EARNED INCOME*****		1:		#		LN	
30I		30M		SRC		FRQ		D	
CCR		2:		390000		GROSS		4	
TY	R	ACTUAL	ALLOW	*****OTHER INCOME*****		LN		SRC	
BASIC			0	AMOUNT		EXEMPT			
ENRGY			0	0		0		TAXES	
SPMNT			0	0		0		NYS DIS	
SHELT		0	0	0		0		WORK EXP	
WATER	2	0	0	0		0		EXEMPT	
FUEL			0	0		0		CH CARE	
OTHER		0	0	TOTAL NET		0		0	
OTHER		0	0	\$\$\$\$PA GRANT\$\$\$\$		0		CH CARE	
OTHER		0	0	GROSS LIMIT		0		CH CARE	
STATE STANDARD		0	0	TOTAL INC		0		DISREGARD	
*****RECOUPMENT*****				CD / AMT S		0		TOT DED	
TY	BALANCE	% MO	AMT	REM	RECOUPMENT	0		UNAVAIL	
	0	00.0	0	0	UTIL /RES	0		NET INC	
	0	00.0	0	0	SHELT/RES	0		*****EFFECTIVE DATE*****	
	0	00.0	0	0	RESTRICTED	0		TO	
RECALC	00.0		0	0	CASH GRANT	0		DATE STORED / /	
FS CASE NO.					SEMI	0			

THE PUBLIC ASSTANCE (PA) BUDGET ABOVE SHOWS HOW FINANCIAL DATA HAS BEEN USED TO CALCULATE YOUR INELIGIBILITY FOR PUBLIC ASSISTANCE (FOR THE PERIOD OF TIME SPECIFIED IN SECTION 7) BECAUSE A PERSON(S) IN YOUR HOUSEHOLD RECEIVED INCOME IN A LUMP SUM PAYMENT. ALL ENTRIES ARE PER MONTH. THE LAST TWO NUMBERS OF ANY MONEY AMOUNT ARE CENTS.

Section 1: The top part of the form identifies this as a PA budget for your household (CASE NAME). The number appearing under "CA" includes those persons who receive assistance. It may also include, under certain circumstances, a non-recipient(s) living with you who have legal responsibility for any person(s) receiving assistance.

Section 2: This is a summary of your family's needs, as determined by statewide schedules of need. These schedules are known as the "Standard of Need". In the "ACTUAL" column is the amount of rent, water, etc., which you reported as actually being paid. In the "ALLOW" column is the amount which is being used to calculate your budget. The amounts in this column which appear next to "BASIC", "ENRGY", "SPMNT", "SHELT" and "FUEL" are determined by the number of persons in your PA case. The BASIC amount is intended for use in meeting essential needs common to all households such as food, clothing, and non-heating electricity. The ENRGY and SPMNT amounts are for meeting domestic energy costs. The SHELT amount is intended to be used in paying for shelter expenses. The FUEL amount is intended to be used in paying for heating of your home. If any amounts are shown opposite the three fields labeled "OTHER", they represent additional allowances to which you may be entitled. If amounts are present opposite the third "OTHER" field, a supplemental child care allowance has been budgeted. The amount which appears next to "TOTAL NEEDS" is the sum of your total monthly needs (rounded down to the next whole dollar), based on the "Standard of Need".

Section 3: This is income received from a source other than a job. Some examples are Social Security Benefits, Unemployment Insurance Benefits, or Veteran's. In the "SRC" column is a code number for the source of the income which appears in the "AMOUNT" column. Income which appears "AMOUNT" column is reduced by the amount appearing in the "EXEMPT" column before it is budgeted against your PA needs. This section may also show income from a source other than a job which was received in a lump sum. Some examples are New York State Disability payments, lottery winnings or an inheritance. If the income which a member(s) in your household received was not earned from a job, and was received in a lump sum, Code 26 appears in this section alongside the amount of the lump sum income

Income Exclusions - Some money which you may have reported is not counted as income and does not appear on the budget. An example of this is income from Educational Grants and Loans.

Section 4: This is income that you reported as being received from a job or through self employment. (Usually the allowable costs of doing business are subtracted before being recorded on the budget for self-employment income; however, Income from Roomers or Boarders/Lodgers is noted in "EXEMPT" below.) The top two lines of Section 4 contain coded information about which case member receives income (LN), if there is a work deduction (30I and 30M), the source of the income (SRC), how often the income is received (FRQ) and if the job is full or part-time (D). The total amount from each source of employment is entered in each column. The meaning of each category is:

"GROSS"	Gross income before any deductions. If the lump sum income which was received by a member(s) of your household was earned income from a job, the amount of the lump sum appears here and either Code "12" or "13" appears under "SRC" in the top row of Section 4. (This includes the income of any person whose income we must count but who is sanctioned.)
"TAXES" "NYS DIS"	-These fields may display amounts only if the budget relates to a period prior to May 1, 1985. They show the total amount of Federal, State, NYC and Social Security (FICA) taxes, and NYS Disability Payments which would not be counted as income available to meet needs.
"WORK EXP"	-Person(s) with earned income receive a \$90 deduction. This deduction is not given when a recipient, without good cause, quits his job, reduces his earnings, refuses to accept employment or does not make a timely report of income.
"EXEMPT"	-If you have income from Roomers or Boarder/Lodgers, the amount of income that income is considered exempt (cost of doing business) will be shown here.
"CH CARE"	-This field is only for budgets prior to 10-01-97. It reflects a formally allowable deduction to persons who paid child care so that they could work.
"DISREGARD"	-This is a special work incentive deduction which public assistance families with children may receive under specific circumstances.
"TOT DED"	-This is the sum of the total deductions listed above.
"UNAVAIL"	-This is the amount of net earned income which is applied against the needs of the persons included in another case
"NET INC"	-The Net Income is equal to the Gross Income minus the total deductions and unavailable amount.

Section 5: The type and balance of any outstanding recoupment (overpayment) is shown.

Section 6: This section is a summary of Sections 2, 3, 4, and 5. The amount next to "TOTAL NEEDS" is the total needs from Section 2. "TOTAL INC" is Sections 3, and 4 added together. The amount next to "CD/AMT" is equal to your total needs subtracted from your total income. The Code "S" next to "CD/AMT" shows that the budget is a surplus. The period for which you will be ineligible to receive assistance is calculated by dividing your "TOTAL INC" by your "TOTAL NEEDS".

Section 7: The dates listed under "INELIGIBLE DATE" show the period that your household will be ineligible to receive public assistance. The amount under "REM" is the remaining income which will be applied against your needs in the month following the period of ineligibility, if you reapply for public assistance.