DEPARTMENT OF BENEFIT PAYMENTS

June 6, 1974

ALL-COUNTY LETTER NO. 74-103

TO: ALL COUNTY WELFARE DIRECTORS
ADMINISTRATIVE SERVICES OFFICERS
WELFARE FISCAL SUPERVISORS
COUNTY AUDITORS

SUBJECT: OVERPAYMENT RECEIVABLE RECORD (FORM ABCD 830)

REFERENCE:

Attached you will find Form ABCD 830, Overpayment Receivable Record. (See Fiscal Handbook 25-416). This form is to be used for the recording of overpayment data during the adjustment period. Substitute forms may be used if all relevant data is provided.

This form will be obtainable at Central Stores, Department of General Services, within 30 to 60 days from the date of this letter. An interim supply will be available through the Forms Control Unit at 916/445-1780.

If you have any questions regarding the use of this form, please contact Evelyn Fisher at 916/445-7046.

Sincerely,

WILLIAM J. KURTZ
Deputy Director
Administration

Attachment

cc: CWDA

OBSOLETE

Superseded by ACL #77-15

Issued 3-17-77

GEN 654 (2/74)

STATE OF CALIFORNIA — HEALTH AND WELFARE AGENCY

DEPARTMENT OF BENEFIT PAYMENTS

OVERPAYMENT RECEIVABLE RECORD

CASE NAME	CASE NUMBER	DISTRICT
ADDRESS	ELIGIBILITY WORKER	

A. SUMMARY OF OVERPAYMENT/UNDERPAYMENT

MO/YR	AMOUNT	MO/YR	AMOUNT	MO/YR	AMOUNT	MO/YR	AMOUNT
1.	$	4.	$	7.	$	10.	$
2.	$	5.	$	8.	$	11.	$
3.	$	6.	$	9.	$	12.	$

1. Net total amount (Items 1 thru 12) . . . . . $
2. Amount to be recovered by current cash adjustment $
3. Amount to be recovered by grant adjustment . . . $

B. OVERPAYMENT DATA

1. ☐ Recipient Met Reporting Responsibility ☐ Recipient did not Meet Reporting Responsibility

Date of Fair Hearing _____ Date of Discovery/Fair Hearing _____

2. Reason for Overpayment

☐ Recipient Error _____

☐ Agency Error _____

C. SCHEDULE OF RECOVERY PLAN AND ACTUAL PAYMENTS RECEIVED

Current Cash Adjustments

MO/YR	AMT. DUE	MO/YR	AMT. REC.	MO/YR	AMT. DUE	MO/YR	AMT. REC.	MO/YR	AMT. DUE	MO/YR	AMT. REC.
1				5				9			
2				6				10			
3				7				11			
4				8				12			

Total Current Cash Adjustments Received — Items 1 thru 12 → $

Grant Adjustments

MO/YR	AMT. DUE	MO/YR	AMT. REC.	MO/YR	AMT. DUE	MO/YR	AMT. REC.	MO/YR	AMT. DUE	MO/YR	AMT. REC.
1				5				9			
2				6				10			
3				7				11			
4				8				12			

Total Grant Adjustments — Items 1 thru 12 → $

D. COMPUTATION OF UNRECOVERED OVERPAYMENT

1. TOTAL AMOUNT RECOVERED (current cash adjustments plus grant adjustments) . . . . . $
2. TOTAL UNRECOVERED OVERPAYMENT (Section A, Line 1 minus Section D, Line 1). . . . . $

ELIGIBILITY WORKER	DATE

DATE	COMMENTS/CONTACTS WITH RECIPIENT

INSTRUCTIONS

This form is for the recording of an overpayment due to a single eligibility factor whether that overpayment occurs in one month only or over a period of several months. Where more than one eligibility factor exists, refer to EAS Manual Section 44-335.14.

For each overpayment that occurs, Sections A, B, and, if possible, C, are to be completed in triplicate. The original is to remain permanently in the case file, the duplicate is to be forwarded to the person maintaining the Overpayment Receivables on an immediate basis and the triplicate is to be forwarded at the end of the adjustment period.

Section C is separated into two sections, current cash adjustments and grant adjustments. After consultation with the recipient, scheduling of the amount to be recovered during the adjustment period should be done in the Month/Year and Amount Due columns. If this section cannot be completed prior to the transmittal of the duplicate, a memo with this information should be forwarded to the overpayments receivable desk.

As recoveries are made either by current cash adjustment or grant adjustment, enter the recovery information in the appropriate part of Section C on both the original and the triplicate.

During the adjustment period a record of the amounts recovered should be forwarded to the person maintaining the Overpayment Receivables so that the duplicate copy may be updated (Fiscal Handbook 25-416).

The box on line 1 of Section D reflects the total amount accumulated in Section C for current cash adjustments and grant adjustments.