CALIFORNIA DEPARTMENT OF CHILD SUPPORT SERVICES

P.O. Box 419064, Rancho Cordova, CA 95741-9064

Reason for this Transmittal
[ ] State Law or Regulation Change
[ ] Federal Law or Regulation Change
[ ] Court Order or Settlement Change
[ ] Clarification requested by One or More Counties
[x] Initiated by DCSS

December 10, 2003

CSS LETTER: 03-25

ALL IV-D DIRECTORS
ALL COUNTY ADMINISTRATIVE OFFICERS
ALL BOARDS OF SUPERVISORS

SUBJECT: CS 34/35 REPORTING INSTRUCTIONS AND DISBURSEMENT POLICIES

The purpose of this letter is to provide local child support agencies (LCSAs) with instructions for completing the CS 34 Monthly Report of Collections and Distributions and the CS 35 Supplement to the CS 34.

Reporting instructions for the completion of the CS 34 and CS 35 are attached. LCSAs are required to begin using the new form effective the October 2003 reporting period.

DCSS will be issuing a subsequent letter detailing practices and policies for working the various categories of undistributed collections to ensure that all LCSAs have clear and consistent practices for proper and timely distribution and disbursement of all child support collections received.

If you have any questions regarding the CS 34/35 reporting instructions, contact Doug Rose at (916) 464-5038 or Douglas.Rose@DCSS.CA.GOV.

Sincerely,

DONNA S. HERSHKOWITZ
Deputy Director
Child Support Services Division

Attachments

DCSS-PR-2003-POL-0004

CHILD SUPPORT SERVICES
MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS
DEFINITIONS and INSTRUCTIONS FOR COMPLETION OF FORM CS 34

The Child Support Services **Monthly Report of Collections and Distributions** (CS 34) is a report of the **local child support agencies (LCSA)** program financial information used for state and federal reporting purposes. The CS 34 is the primary reporting format to satisfy federal reporting requirements.

The following are detailed instructions for completing the CS 34 Report.

<u>Report Period</u>

The reporting period for this report is Monthly. The effective date for this revised CS 34 is October 1, 2003.

General Requirements/Definitions

The CS 34 must reflect collections received and collections distributed and disbursed for the entire applicable reporting period.

Collections Received. A child support payment is considered to be received on the date it arrives at a designated collection point via mail, private courier, electronic transfer or hand delivery. Any amount received and reasonably identifiable as a child support collection under Title IV-D must be reported on Line 2 of this form, even if it cannot be immediately associated with a specific Title IV-D case. Any amount paid in advance of its due date (a "prepaid" or "future" collection) must also be reported on Line 2 in the month received, even if it is known that distribution will not occur until a later month.

Collections Distributed and Disbursed. Distribution is the identification and allocation or apportionment of a support collection to current and past-due support, as applicable, to a specific case or individual. Disbursement is the actual process of dispensing or paying out the collection. Distribution under Section 457 of the Social Security Act requires disbursement of a collection according to a specified allocation.

In accordance with the definitions above and for the purposes of reporting on this form, to be considered "Distributed" under Section 457 of the Act (and to be reported as such on Lines 7a through 8, as appropriate, of this reporting form), a collection must be both distributed and disbursed. Any collection that has been distributed (i.e., "identified and allocated or apportioned") but not disbursed (i.e., "dispensed or paid out") is considered "Undistributed" under Section 457 (and is reported as such on Line 9b, as appropriate, of this reporting form).

A collection is considered disbursed on the date the funds are forwarded via check, electronic transfer or other means to the intended final recipient, including the custodial family, State or Federal Agency, including those agencies that administer programs under Titles IV-A, IV-E, and XIX of the Social Security Act.

If a check/warrant used to disburse a collection is returned as undeliverable or remains uncashed and is considered "stale," that amount can no longer be considered to be "disbursed." In that instance, the amount of collections designated as "distributed and disbursed" must be reduced accordingly and the amount redesignated as Undistributed until another disbursement can be attempted. (See additional instruction below and instruction for Line 9d.)

General Requirements/Definitions

This report does not include non IV-D collections or disbursements.

IV-D Case. Any child support enforcement case in which the custodial party has either assigned his or her rights to receive support payments to the State as a condition of receiving assistance (either as a current or former recipient of such assistance) or has filed an application for services available under Title IV-D. Although a limited amount of Federal funding is available to compile data, maintain registers and process payments for non-IV-D cases that do not meet these criteria, such cases are not considered "IV-D cases."

Specific case types to exclude are; spousal only (non IV-D support order), and court trustee order (county acting as collection and disbursement only).

Non-IV-D Case. Any child support enforcement case in which the custodial party has neither assigned his or her rights to receive support to the State nor has filed an application for services available under Title IV-D.

Fees and Other non-required dollars for reporting. Any distribution to fees (i.e. genetic test fees), or county specific reimbursements, will be treated as a reduction of the collection in line 2 from which it was originally reported. If the monies were never reported then the reduction to line 2 is not performed.

Collections Returned to Payor(s). Amounts collected which are returned to a payor and have previously been reported to the State should reduce the collection source where the collection was originally reported. For example, the amount reported as federal tax offset on Line 2a, Box 7 would be reduced by the amount of a collection received by federal tax offset that is returned to a payor.

Forwarding Inter-County Collections. Amounts collected by your county which are subsequently forwarded to other California counties including those that have been previously reported to the State should reduce the collection source where the collection was originally reported. Record this entry in the month that the collection is forwarded (i.e., disbursed). NOTE: When a county forwards a collection to another California county, the forwarding county must identify to the receiving county the original collection source and the date of collection.

Receiving Inter-County Collections. Amounts received from other California counties must be posted in the appropriate collection source box.

Completing All Entries. All non-shaded line items on the form in Sections A through C are to be completed for each month. All data elements must be reported. Using "Not

Available" (NA) or "Not Applicable" (NAP) is not allowed. **All non-shaded cells MUST have a numeric entry, even if that entry is zero ("0")**.

NOTE: Additionally, "summary" cells or cells with calculations will remain non-shaded cells with electronic upload cross checks that will not allow the file to be submitted unless the cell entry is correct. Applicable cells will be referenced in the instructions as "summary cell".

Due Dates: This report must be electronically submitted and approved no later than the fifteenth calendar day of the month following the report month, e.g., the August report is sent no later than September 15.

The **CS 34 Monthly Report of Collections and Distributions** is a fiscal document. LCSAs may be considered out of compliance if the approved report is not received and approved electronically by Department of Child Support Services (DCSS) by the close of business on the day it is due. **All data included on the CS 34 must be complete and accurate.** Delayed or late reports may result in the withholding of all **LCSA Administrative Funding**.

NOTE: LCSAs are required to have case level detail documentation for an audit trail to support the amount reported on the CS 34. The format for this documentation is contained in the Functional Requirements Document (FRD) and must be stored in a fashion that will accommodate electronic data requests. The case level detail documentation shall be kept at the local level and made available upon request for federal and state auditors, program reviewers and DCSS. The required retention period for the CS 34 and detail documentation is four years and four months, unless legal action is in progress requiring longer retention.

CHILD SUPPORT SERVICES
MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

Local child support agencies administering the Child Support Services Program under Title IV-D of the Social Security Act are required to complete and submit this report **monthly** in accordance with instructions issued by the California Department of Child Support Services (DCSS). All amounts reported must be actual collection amounts and <u>not</u> rounded to the nearest dollar.

Box 1   **County Name -** Enter the reporting county name.

Box 2   **County FIPS Code-** Enter the reporting county Federal Information Processing Standards (FIPS) code.

Box 3   **Report Month/Year -** Enter the month/year of the effective date of the transaction.

Box 4   **Report Type -** Check Initial Report.

SECTION A: AVAILABLE COLLECTIONS

Line 1, Box 5. Balance Remaining Undistributed From Previous Month - The amount of collections that remained undistributed at the end of the previous month **(Line 9b, Box 43 prior month)**.
NOTE: Box 5 must equal Line 9b, Box 43, prior month.

Line 2, Box 6. Total Collections Received During the Month - All collections received by the county from various sources, including those amounts that will be forwarded on to other States **(sum of Lines 2a – 2g). "Summary cell"**

NOTE: Box 6 must equal the sum of Box 7+8+9+10+11+12+13.

SPECIAL REPORTING INSTRUCTIONS for Line 2, Boxes 7 through 13

Amounts reported in boxes 7 through 13 should be "net" amount of collections received by source during the report month, less collections returned to payor (s), less collections forwarded to other California counties, inclusive of adjustments to collections and less collections necessary to correct a previous report.

Note: Adjustments or changes needed on any previous month's report must be reported on the current month report. Adjustments are reported in the initial source of collection line. i.e. $100 reported as a collection in box 7 in March would be adjusted in April's box 7. LCSAs cannot modify any previous month's report.

Line 2a, Box 7. From the Offset of Federal Tax Refunds - Amounts received as a result of the Financial Management Services (FMS) offset of federal income tax refunds and adjustments to previous months. Report the full amount of the collection, prior to the reduction of the IRS service fee. Do not include amounts

received through the IRS "full collection" process nor the Federal Administrative offset process.

Line 2b, Box 8. From the Offset of State Tax Refunds - Amounts received as a result of the offset of state income tax (Franchise Tax Board) refunds and adjustments to previous months.

Line 2c, Box 9. From the Offset of Unemployment Compensation Payments - Amounts received as a result of the offset of unemployment compensation insurance payments (Unemployment Insurance Benefits – UIB) and adjustments to previous months.

Line 2d, Box 10. Through Procedures for the High Volume, Automated Administrative Enforcement in Interstate Cases (AEI) - Administrative Enforcement Interstate (AEI). Currently California does not use this category; a zero should be entered.

Line 2e, Box 11. From IV-D & Non-IV-D Income Withholding - Amounts received on behalf of IV-D cases as a result of either voluntary or involuntary income withholding, and adjustments to previous months. Include amounts withheld from FTB full collections that are identified as income withholding. Do not include amounts withheld from unemployment compensation, reported on Line 2c. Currently California does not report Non-IV-D cases.

Line 2f, Box 12. From Other States - Amounts received from another state and adjustments to previous months. Include any amount received as the "initiating" state either in Interstate or AEI cases. Any fees or recovered costs retained by the other state are reported on Line 13 and are not included in this amount.

Line 2g, Box 13. From Other Sources - All other amounts and adjustments from previous months - **not reported above** – received through the county's own collections procedures. This includes, but is not limited to: payments received directly from non-custodial parents; collections received through the IRS' full collection process; collections received as a result of the administrative offset process; collections received through various state match systems, collections made as a result of the passport denial process, liens, workers' compensation offset, disability insurance offset, non-wage withholding FTB child support collections, and any other county collection processes. For "administrative offset" collections, report the full amount of the collection, prior to the reduction for the service fee. Any entry in this Box must be itemized on the **CS 35, Section A.**

　　　　NOTE: Box 13 amount must equal amount on CS 35, Line 7, Box 10.

Line 3, Box 14. Net Amount of Increasing and Decreasing Adjustments - Any entry necessary to correct a previous report that cannot be corrected with an entry on the original reporting line. This line should frequently be zero. An entry on this line may be a negative number. **Any entry on this line MUST be thoroughly explained on the CS 35, Section B. In addition, the contact person should be able to explain the necessity of any entry when contacted by State or federal auditors or program reviewers.**

NOTE: Box 14 amount must equal amount on CS 35, Line 8, Box 11.

Line 4, Box 15. Collections Forwarded to Non-IV-D Cases - California does not currently report non-IV-D cases.

General Definitions that apply to Lines 5 – 7C –

In instances where it is known that a case has changed its status between the date a collection is received and the date of distribution and disbursement (e.g., from Former to Current Assistance or vice versa), report the amount distributed in Column A through F in accordance with the case status as of the date of _receipt_ of the collection.

*Column A: Current IV-A Assistanc*e. Collections received and distributed on behalf of children who are recipients of Temporary Assistance for Needy Families (TANF) under title IV-A of the Social Security Act, and for whom support rights have been assigned to the State and a referral to the IV-D agency has been made.

*Column B: Current IV-E Assistanc*e. Collections received and distributed on behalf of children who are entitled to Federal Foster Care maintenance assistance payments under title IV-E of the Social Security Act, and for whom support rights have been assigned to the State and a referral to the State IV-D agency has been made.

*Column C: Former IV-A Assistanc*e. Collections received and distributed on behalf of children who *formerly* received assistance under title IV-A (TANF or Aid to Families with Dependent Children [AFDC]) of the Social Security Act.

Column D: Former IV-E Assistance. Collections received and distributed on behalf of children who *formerly* received assistance under title IV-E (Foster Care) of the Social Security Act.

*Column E: Medicaid Never Assistanc*e. Collections received and distributed on behalf of children who are receiving Child Support Enforcement services under title IV-D of the Social Security Act, and who are either currently receiving or who have formerly received Medicaid under title XIX of the Social Security Act , but who are not currently receiving and have not previously received assistance under either title IV-A (TANF or AFDC) or title IV-E (Federal Foster Care) of the Social Security Act. Also, include Medically Needy Only (MNO). (Medicaid is the equivalent to California's Medi-Cal program.)

Column F: Other Never Assistance. Collections received and distributed on behalf of children who are receiving Child Support Enforcement services under title IV-D of the Social Security Act, but who are not currently receiving and have not previously received assistance under title XIX, title IV-A (TANF or AFDC) or title IV-E (Foster Care) of the Social Security Act. Include State-Only and County-Only aid cases.

Column G: Total. Enter, where applicable, the sum of the amounts entered in Columns A through F.

FMAP Rate. The Federal Medical Assistance Percentage Rate applicable to each State as defined in Section 1905(b) of the Social Security Act. This rate, not less than 50

percent, is based on the ratio of the per capita income in each State to that of the United States and is reassessed and published in the Federal Register annually.

Line 5, Box 16,17, 49-52. Collections Forwarded to Other States - Amounts received in response to a request for assistance from another state and forwarded during the month to that state for distribution, including interstate cases and AEI collections. (These amounts are included in the entries made on boxes 7 through 13.)

Line 5, Box 16. **(A) Current IV-A Assistance** - Enter the amount disbursed to other states for cases that are currently receiving TANF (IV-A.)

Line 5, Box 17. (B) Current IV-E Assistance - Enter the amount disbursed to other states for cases that are currently receiving Federal Foster Care assistance (IV-E).

Line 5, Box 49. (C) Former IV-A Assistance - Enter the amount disbursed to other states for former assistance cases. (TANF (IV-A))

Line 5, Box 50. (D) Former IV-E Assistance - Enter the amount disbursed to other states for former assistance cases. Federal Foster Care (IV-E)

Line 5, Box 51. (E) Medicaid Never Assistance - Enter the amount disbursed to other states for never assistance cases that are currently receiving or have formerly received Medicaid payments under title XIX.

Line 5, Box 52. (F) Other Never Assistance - Enter the amount disbursed to other states for never assistance cases that are **not** currently receiving and have never formerly received Medicaid payments under title XIX.

Line 5, Box 20. Total Collections Forwarded to Other States - All collections forwarded to other States. **(Boxes 16+17+49+50+51+52)**. **"Summary cell"**

NOTE: Box 20 amount must equal the sum of Boxes 16+17+49+50+51+52.

Line 6, Box 21. Total Collections Available for Distribution - The total amount of collections eligible for distribution by the county during the month. **[(Boxes 5+6 +14) minus (Boxes 15+20)]**. **"Summary cell"**

NOTE: Box 21 amount must equal the sum of Boxes(5+6+14) minus the sum of Boxes (15+20).

SECTION B: DISTRIBUTED/UNDISTRIBUTED COLLECTIONS

Line 7a, Boxes 22, 23, 54, 55. Collections Distributed As Assistance Reimbursement - Collections that will be divided between the Local, State and Federal governments to reimburse their respective shares of either Title IV-A assistance payments or

Title IV-E Federal Foster Care maintenance payments. (NOTE: No entry is to be made for "Never Assistance" cases, Columns E and F.)

Line 7a, Box 22. (A) Current IV-A Assistance - Enter the amount of support distributed for current TANF (IV-A) assistance cases that was used to recoup in whole or in part the Unreimbursed Assistance Pools (UAPs). Includes disregard on federal aid categories.

NOTE: Box 22 amount must equal the sum of the CS 35, Box 14 + Box 21.

Line 7a, Box 23. (B) Current IV-E Assistance - Enter the amount of support distributed for current Federal Foster Care (IV-E) assistance cases that was used to recoup in whole or in part the UAPs.

NOTE: Box 23 amount must equal amount on the CS 35, Box 43.

Line 7a, Box 53. (C) Former IV-A Assistance - Enter the amount of support that was distributed to all former TANF (IV-A) assistance cases used to recoup in whole or in part the UAPs.

NOTE: Box 53 amount must equal the sum of the CS 35, Box 64 + Box 70

Line 7a, Box 54. (D) Former IV-E Assistance - Enter the amount of support that was distributed to all former Federal Foster Care (IV-E) assistance cases used to recoup in whole or in part the UAPs.

NOTE: Box 54 amount must equal amount on the CS 35, Box 91

Line 7a, Box 25. (E) Total - The total amount of collections distributed as assistance reimbursement by the county during the month**. (Boxes 22+23+53+54) "Summary cell"**

NOTE: Box 25 amount must equal the sum of Boxes 22+23+53+54.

Line 7b, Box 26, 27, 55-58. Collections Distributed As Medical Support Payments - Enter the amount of any collection that corresponds to any amount specifically designated in a support order for medical support. To the extent that medical support has been assigned to the state, medical support collections should be forwarded to the Department of Health Services (DHS) for distribution in accordance with current regulations. Otherwise, the amount must be forwarded to the family.

Line 7b, Box 26. (A) Current IV-A Assistance - Enter the amount disbursed to DHS for medical support in current TANF (IV-A) assistance cases.

Line 7b, Box 27. (B) Current IV-E Assistance - Enter the amount disbursed to DHS for medical support in current Federal Foster Care (IV-E) assistance cases.

Line 7b, Box 55. (C) Former IV-A Assistance - Enter the amount disbursed to DHS and to the

family for assigned medical support in former TANF (IV-A), assistance cases.

Line 7b, Box 56. (D) Former IV-E Assistance - Enter the amount disbursed to DHS and to the family for assigned medical support in former Federal Foster Care (IV-E) assistance cases.

Line 7b, Box 57. Medicaid Never Assistance - Enter the amount disbursed to the family and to DHS for medical support in never assistance cases and who are currently receiving or have formerly received Medicaid under Title XIX. This line includes payments disbursed in current or former MNO cases (i.e., non-assistance cases which are currently or have in the past received Medicaid benefits only and there is an assignment of support rights to medical sum-certain obligations).

Line 7b, Box 58. (F) Other Never Assistance - Enter the amount disbursed to the family for current or former state CalWorks or KinGap, current or former Non-Federal Foster Care cases and medical support in never assistance cases. This line includes medical support payments to the family who has never received public assistance under TANF (IV-A), Foster Care (IV-E), or Medicaid (Title XIX) federal assistance programs.

Line 7b, Box 30. (E) Total - The total amount of collections distributed as medical support by the county during the month **(Boxes 26+27+55+56+57+58) "Summary cell"**

NOTE: Box 30 must equal the sum of Boxes 26+27+55+56+57+58.

Line 7c, Boxes 31, 32, 59-62. Collections Distributed To The Family or Foster Care - Collections not included on either Lines 7a or 7b that are distributed either to the family or to the foster care agency to be used on the child's behalf. Report on this line any collections distributed to the family, but assigned by the family and forwarded to another State or county agency (e.g., a State- or county-run Foster Care or Child Care program). Also report on this line, collections distributed to the family but sent, at the direction of the family, to the address of a private collection agency.

Line 7c, Box 31. (A) Current IV-A Assistance - Enter the amount of collections distributed as excess, or to SSI or MFG children sent to families where there is at least one member of the IV-D case currently receiving TANF (IV-A) assistance (Mixed Statuses). (NOTE: Excess is the amount of the collection remaining that is greater than the Total UAP balance).

Line 7c, Box 32. (B) Current IV-E Assistance - Enter the amount of pass-on and excess paid to foster care agency to be used on a child's behalf. (NOTE: Pass-on is the amount of current support remaining after recoupment of the current Federal Foster Care (IV-E) assistance payment. Excess is the amount of the collection remaining that is greater than the Total UAP balance.)

NOTE: Box 32 must equal the sum of the CS 35 Boxes (41+42).

Line 7c, Box 59. (C) Former IV-A Assistance - Enter the amount of support disbursed to families in former TANF (IV-A) assistance cases.

Line 7c, Box 60. (D) Former IV-E Assistance - Enter the amount disbursed to families in former Federal Foster Care (IV-E) assistance cases.

Line 7c, Box 61. (E) Medicaid Never Assistance - Enter the amount of support disbursed to the family in Medicaid never assistance cases. This line includes support payments disbursed to the family who are currently receiving or have formerly received Medicaid under Title XIX, but who are not currently receiving and who have never formerly received assistance under either TANF (IV-A) or Foster Care (Title IV-E). (This line would include those families receiving Medicaid under Title XIX, who are currently or who have formerly received assistance under a State-run public assistance program and to the families who have never received assistance under a State-run public assistance program.)

Line 7c, Box 62. (F) Other Never Assistance - This line includes support payments for the family who has never received public assistance under TANF (IV-A), Foster Care (IV-E), or Medicaid (Title XIX) federal assistance programs. (This line would include families who are currently or who have formerly received assistance under a State-run public assistance program and to the families who have never received assistance under a State-run public assistance program.)

Line 7c, Box 35. (E) Total - The total amount of collections disbursed to the family by the county during the month. **(Boxes 31+32+59+60+61+62) "Summary cell"**

        NOTE: Box 35 must equal the sum of Boxes 31+32+59+60+61+62.

Line 8, Boxes 36, 37, 63-66. Total Collections Distributed During the Month - Collections distributed by the county during the month, itemized by case designation.

Line 8, Box 36. (A) Current IV-A Assistance - The total amount of collections distributed to TANF (IV-A) assistance cases. **(Boxes 22+26+31) "Summary cell"**

        NOTE: Box 36 must equal the sum of Boxes 22+26+31.

Line 8, Box 37. (B) Current IV-E Assistance - The total amount of collections distributed to Federal Foster Care (IV-E) assistance cases. **(Boxes 23+27+32) "Summary cell"**

        NOTE: Box 37 must equal the sum of Boxes 23+27+32.

Line 8, Box 63. (C) Former IV-A Assistance - The total amount of collections distributed in former TANF (IV-A) assistance cases. **(Boxes 53+55+59) "Summary cell"**

        NOTE: Box 63 must equal the sum of Boxes 53+55+59.

Line 8, Box 64. (D) Former IV-E Assistance - The total amount of collections distributed in former Federal Foster Care (IV-E) assistance cases. **(Boxes 54+56+60) "Summary cell"**

> **NOTE: Box 64 must equal the sum of Boxes 54+56+60.**

Line 8, Box 65. (E) Medicaid **Never Assistance -** The total amount of collections distributed in Medicaid never assistance cases. **(Boxes 57+61) "Summary cell"**

> **NOTE: Box 65 must equal the sum of Boxes 57+61.**

Line 8, Box 66. (F) Other Never Assistance - The total amount of collections distributed in Other never assistance cases. **(Boxes 58+62) "Summary cell"**

> **NOTE: Box 66 must equal the sum of Boxes 58+62.**

Line 8, Box 40: (E) Total - The total amount of collections distributed by the county during the month. **(Sum of Boxes 36+37+63+64+65+66) "Summary cell"**

> **NOTE: Box 40 must equal the sum of Boxes 36+37+63+64+65+66. In addition, Line 8, Boxes 36 – 37, 63 - 66 <u>PLUS</u> Line 5, boxes 16 – 17, 49 – 52 must equal the sum of lines 25 & 27, CS1257, "Total distributed collections".**
>
> **"STALE"/UNCASHED DISBURSEMENTS –**
> If a check/warrant used to disburse a collection is returned as undeliverable or remains uncashed and is considered "stale," that amount can no longer be considered to be "disbursed." In that instance, the amount of collections designated as "distributed and disbursed" must be reduced accordingly in the report month that it is determined to be stale. The amount should be redesignated as Undistributed until another disbursement can be attempted. In other words, the LCSA must reverse the distribution transaction by including a negative adjustment on the appropriate line in the month in which the check/warrant becomes "non-negotiable."
>
> **Note: Adjustments or changes needed on any previous month's report must be reported on the current month report. Adjustments are reported in the initial source of disbursement line. i.e. $100 reported as a disbursement in box 16 in March would be adjusted in April's box 16. LCSAs cannot modify any previous month's report.**

Line 9, Box 41. Gross Undistributed Collections - The amount of collections that the county has not yet distributed during the month. **(Box 21 minus Box 40.) "Summary cell"**

> **NOTE: Box 41 must equal Box 21 minus Box 40.**

Line 9a, Box 42. Undistributable / Abandoned Collections - The portion of collections reported on Box 41 that, despite numerous attempts, the LCSA has determined it will be unable to distribute in accordance with the provisions of Section 457 of the Social Security Act and unable to return to the non-custodial parent. Under state law, these amounts are considered to be "abandoned property." In accordance with Federal instructions, this amount is considered "program income" and must be included in the entry reported on the CS 356 Quarterly Administrative Expenditure Claim (AEC), Section VII, line B, cell 25 – Miscellaneous Program Income. In addition, any interest earned on undistributable/abandonded collections must be included in the entry reported on the AEC, Section VII, line A, cell 24 – Interest.

NOTE: The LCSA must attempt to locate the non-custodial party for a period of six months. Undistributable collections are to be held in stewardship for two years after the six-month period to allow the payee a period of time to seek payment. At the end of two years, if no payment has been claimed, the funds revert to the county general fund (i.e. escheated). Put here any monies that the county has **_escheated_** *during the reporting period.*

NOTE: Money reverted to the County General Fund remains child support program money and must come back to the LCSA. (The LCSAs' Administrative Expenditure Claim will be offset by the additional program income).

Line 9b, Box 43. Net Undistributed Collections - The amount of collections that remains available for distribution in a future month. Any entry on this line should be itemized using the CS 35, Section E **(Box 41 minus Box 42.) "Summary cell"**

NOTE: Box 43 must equal Box 41 minus Box 42. Additionally, Box 43 must equal Box 67+68.

Line 9c, Box 67. Undistributed Collections Pending Distribution - The portion of net undistributed collections reported on Line 9b that have been identified and allocated and which the county is reasonably certain will have a definite disbursement date in the near future. These undistributed collections include, but are not limited to:

(i)   collections that were received within the past two business days following receipt, and pending distribution within federal timelines;
(ii)   collections being held for up to six months that were offset from Federal or State refunds from joint tax returns of Non-TANF families;
(iii)   collections received and held for future support;
(iv)   collections held pending resolution of a legal dispute and any timely appeal (including but not limited to estate resolutions; contested paternity; contested tax, insurance, and pension intercepts; arrearage balance disputes; contested bank levies; contested seizures of lottery winnings, and other lump-sum seizures; etc.)
(v)   collections processed, but not yet transferred to other state or federal agencies administering programs such as TANF, IV-E and non-IV-E (foster care), Medicaid, or S-CHIP.
(Enter only Total amount in Column G.)

> **NOTE: Line 9c, Box 67. Box 67 must equal the sum of the CS 35 boxes (112+119+133+154+175).**

Line 9d, Box 68. Undistributed Collections Unresolved. - The portion of net undistributed collections reported on Line 9b that either have not been fully identified or allocated and do not have a definite disbursement date due to insufficient information. These undistributed collections include, but are not limited to:

(i)   unidentified collections;
(ii)   collections pending the location of the custodial or noncustodial parent;
(iii)   collections initially disbursed by check that remains uncashed and is now considered stale-dated and non-negotiable in accordance with State law and procedures;
(iv)   collections with inaccurate or missing information, including, but not limited to, information to be supplied by an employer or where the amount of the payment does not equal the transmittal amount; collections received on cases with no open or active account; and other data issues;
(v)   Other collections remaining undistributed.
       (Enter only Total amount in Column G.)

> **NOTE: Line 9d, Box 68. Box 68 must equal the sum of the CS 35 boxes (126+140+147+161+168+182).**

SECTION C. FEDERAL SHARE/INCENTIVE PAYMENTS/FEES

Line 10 a. Federal Share of IV-E Collections - The portion of child support collections used to reimburse the Federal government for its share of past assistance payments under title IV-E of the Social Security Act.

Line 10 a, Box 45. Federal Share of Current IV-E Collections (Box 23 multiplied by the federal sharing ratio.) Must equal Box 44 of the CS 35. **"Summary cell"**

> **NOTE: Box 45 must equal the amount on the CS 35, Box 44, and also must equal Box 23 times the federal sharing ratio.**

Line 10 a, Box 69. Federal Share of Former IV-E Collections (Box 54 multiplied by the federal sharing ratio.) Must equal Box 92 of the CS 35. **"Summary cell"**

> **NOTE: Box 69 must equal the amount on the CS 35, Box 92, and also must equal Box 54 times the federal sharing ratio.**

Line 10 a, Box 70. Total - The total amount of the federal share of IV-E collections. Must equal Box 45 + Box 69.

> **NOTE: Box 70 must equal the sum of Box 45+69.**

Line 10b. Federal Share of IV-A Collections -. The portion of child support collections used to reimburse the Federal government for its share of assistance payments under

title IV-A of the Social Security Act. (NOTE: Enter amounts only in Columns A and C, plus the Total in Column G.)

Line 10 b, Box 44. Federal Share of current IV-A Collections (Box 22 multiplied by the federal sharing ratio) must equal **Sum of (Box 15 + Box 22)** of the CS 35. **"Summary cell"**

NOTE: Box 44 must equal the sum of CS 35 (Box 15+22), and also must equal CS 34 Box 22 times the federal sharing ratio.

Line 10 b, Box 71. Federal Share of former **IV-A Collections** must equal sum of (Box 65+71) of the CS 35. **"Summary cell"**

NOTE: Box 71 must equal the sum of the CS 35 (Box 65+71), and also must equal CS 34 Box 53 times the federal sharing ratio.

Line 10 b, Box 72. Total - The total amount of the federal share of IV-A collections. Must equal Box 44 + Box 71.

NOTE: Box 72 must equal the sum of Box 44 + Box 71.

Line 11. Estimated Incentive Payments Retained by the State - County need not complete.

Line 12. Quarterly Grant Adjustment. - County need not complete.

Line 13, Box 48. Fees Retained by Other States - The amount of fees or costs recovered by other states from collections forwarded to the reporting state. The net amount of the collection forwarded is reported on **Line 2f, Box 12**. Amounts entered on this line are not included on any other line of this report.

Reporting Guidelines

Certification and Submission Requirements - Counties will use the automated process for preparing this report using the secured county Website at https://counties.dcss.ca.gov. For instructions on how to prepare and submit an electronic CS 34 report, click on the respective CS 34 Instructions within the secured county Website. By using the electronic IV-D Director "approval code", the IV-D Director certifies the CS 34 data is accurate and was compiled using the State's standard data definitions and processing rules.
The CS 34 must be electronically transmitted and approved through the County Secure Website to the California DCSS no later than the 15th calendar day of the month following the report month.

Inquiries can be mailed to:

Department of Child Support Services

Accounting and Fiscal Services Section
P.O. Box 419064, MS 20
Rancho Cordova, CA 95741-9064
Telephone: (916) 464-5150

Revisions: Counties may request approval to revise previously submitted reports until the last day of the month following the report month. Requests should be directed to the address or phone number listed above.

Substitutes: The CS 34 is a required report and **NO SUBSTITUTES ARE PERMITTED**.

ERRATA

Errata #1 10/16/03: Page 13, line 10a, Box 69 was corrected to be box 54 times the Fed Share ratio, not box 23.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF CHILD SUPPORT SERVICES

CHILD SUPPORT SERVICES
MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

County Name: 1)	County FIPS Code: 2)	Report Month/Year: 3)	Report Type: 4) ☐ Initial Report ☐ Revised Report

SECTION A.   AVAILABLE COLLECTIONS

1. Balance Remaining Undistributed from Previous Month (From line 9b Last Month).. **5)**

2. Total Collections Received During the Month [Sum of Lines 2a through 2g]... **6)**

2a. From Offset of Federal Tax Refund	7)	2e. From IV-D & Non IV-D Income Withhold.	11)
2b. From Offset of State Tax Refund	8)	2f. From Other States.................	12)
2c. From Offset of Unemployment Comp	9)	2g. From Other Sources..............	13)
2d. Through Admin. Enforcement	10)		

3. Net Amount of Increasing and (Decreasing) Adjustments.. **14)**
4. Collections Forwarded to Non IV-D Cases.. **15)   N/A**

	(A) Current IV-A Assistance	(B) Current IV-E Assistance	(C) Former IV-A Assistance	(D) Former IV-E Assistance	(E) Medicaid Never Assist.	(F) Other Never Assistance	(G) Total
5. Collect. Forwarded to Other States	16)	17)	49)	50)	51)	52)	20)
6. Collections Available for Distribution............							21)

SECTION B.   DISTRIBUTED / UNDISTRIBUTED COLLECTIONS

	(A)	(B)	(C)	(D)	(E)	(F)	(G)
7a. Distributed as Assist. Reimburse.	22)	23)	53)	54)			25)
7b. Distributed as Medical Support	26)	27)	55)	56)	57)	58)	30)
7c. Distributed To Family or FC	31)	32)	59)	60)	61)	62)	35)
8. Total Collections Distributed	36)	37)	63)	64)	65)	66)	40)

9. Gross Undistributed Collections.. **41)**

9a. Undistributed Collections Determined Undistributable and Abandoned .... **42)**

9b. Net Undistributed Collections... **43)**

9c. Net Undistributed Collections Pending Distribution... **67)**

9d. Net Undistributed Collections Unresolved.. **68)**

SECTION C.   FEDERAL SHARE / INCENTIVE PAYMENTS / FEES

10a. Federal Share of IV-E Collections…		45)		69)			70)
10b. Federal Share of IV-A Collections…	44)		71)				72)

11. Estimated Incentive Payments..

12. Quarterly Grant Adjustment..

13. Fees Retained by Other States.. **48)**

This certifies that the information on this form is accurate and true to the best of my knowledge and belief.

Signature, IV-D Director	Signature, Approving Official
Date:	
Typed Name, Title	Typed Name, Title, Agency

CS 34 (10/01/03)

CHILD SUPPORT SERVICES
SUPPLEMENT TO THE CS 34 MONTHLY REPORT OF COLLECTIONS AND
DISTRIBUTIONS (CS 35)

DEFINITIONS and INSTRUCTIONS FOR COMPLETION OF FORM CS 35

The Child Support Services Supplement to the CS 34 Monthly Report of Collections and Distributions (CS 35) is a report of the local child support agency's (LCSA) program financial information. This information is used for state and federal reporting purposes. The supplemental CS 35 was designed to capture state only requirements and to provide specific CS 34 line item detail. The CS 35 is divided into six sections: Section A provides detailed itemization of collections from other sources (reported at a summary level on the CS 34), Section B provides supporting detail for net increasing/decreasing adjustments (reported on the CS 34), Sections C and D provide data related to current and former assistance cases (including state only cases), Section E provides supporting detail for net undistributed collections, and Section F provides supporting detail for child/family/spousal collections distributed to the family.

The following are detailed instructions for completing the CS 35 Report.

Report Period

The reporting period for this report is Monthly. The effective date for this revised CS 35 is October 1, 2003.

General Requirements/Definitions

The CS 35 must reflect collections received and collections distributed and disbursed during the entire applicable reporting period. Complete each report as required for the month. The following definitions for collections and disbursements apply:

Collections Received. A child support payment is considered to be received on the date it arrives at a designated State-level or LCSA-level collection point via mail, private courier, electronic transfer or hand delivery. The original date of receipt does not change for monies that are subsequently processed as Undistributed Collections. Any amounts received and reasonably identifiable as a child support collection under Title IV-D must be reported, even if an individual amount cannot be immediately associated with a specific Title IV-D case. Any amount paid in advance of its due date (a "prepaid" or "future" collection) must also be reported in the month received, even if it is known that distribution will not occur until a later month.

Collections Distributed and Disbursed. Distribution is the identification and allocation or apportionment of a support collection to current and past-due support, as applicable, of a specific case or individual. Disbursement is the actual process of dispensing or paying out the collection. Distribution under Section 457 of the Social Security Act (Act) requires disbursement of a collection according to a specified allocation order.

In accordance with the definitions above and for the purposes of reporting on this form, to be considered "distributed" under Section 457 of the Act (and to be reported as such in Sections B and C, as appropriate, of this reporting form), a collection must be both distributed and disbursed.

Any collection that has been distributed (i.e., "identified and allocated or apportioned") but not disbursed (i.e., "dispensed or paid out") is considered "undistributed" under Section 457 of the Act (and is reported as such in Section E, as appropriate, of this reporting form).

A collection is considered disbursed on the date the funds are forwarded via check, electronic transfer or other means to the intended final recipient, including the custodial family, State or Federal Agency, including those agencies that administer programs under Titles IV-A, IV-E, and XIX of the Act.

"Stale" / Uncashed Disbursements. On occasion, a check issued as a disbursement is either not cashed in a timely manner and is considered "stale" and no longer negotiable, or is returned uncashed to the county as undeliverable.

If a check used to disburse a collection is returned as undeliverable, or remains uncashed and is considered "stale," that amount can no longer be considered to be "disbursed." In these instances , the payment transaction must be reversed, the amount of collection designated as "distributed and disbursed" must be reduced accordingly and the amount redesignated as undistributed until another disbursement can be attempted.

In an effort to ensure timely receipt of support and to reduce the number of stale dated items, the local child support agency shall establish a process by which the county auditor/controller notifies the local child support agency of warrants that remain un-cashed.

This report does not include non IV-D collections or disbursements. Specific case types to exclude are spousal only (non IV-D support order) and court trustee order (county acting as collection and disbursement only).

IV-D Case. Any child support enforcement case in which the custodial party (CP) has either assigned his or her rights to receive child support payments to the State as a condition of receiving public assistance (either as a current or former recipient of such public assistance) or has filed an application for child support services available under Title IV-D. Although a limited amount of federal funding is available to compile data, maintain registers and process child support payments for non-IV-D cases that do not meet these criteria, such cases are not considered "IV-D cases."

A **current assistance case** is a Title IV-D case that is currently receiving public assistance under CalWORKS/KinGAP (Title IV-A), federal Foster Care (Title IV-E) or non-federal Foster Care assistance programs. For distribution purposes on the CS 35 report, all state only cases (including non-federal Foster Care cases) currently receiving public assistance are also included as current assistance cases.

A **former assistance case** is a Title IV-D case which is not currently but has in the past received public assistance under CalWORKS/KinGAP, federal Foster Care (Title IV-E) or non-federal Foster Care assistance programs. For distribution purposes on the CS 35 report, all state only cases (including non-federal Foster Care cases) that have formerly received public assistance are also included as former assistance cases.

Excess: In all assistance cases, except federal Foster Care, excess will result only in the situation where the amount of the collection is greater than the total unreimbursed assistance

pool (UAP) balance. If the UAP is a zero balance, then excess is determined by subtracting the current assistance payment from the support payment in all cases except federal Foster Care.

Excess: In Federal Foster Care cases, excess is the arrears collection amount in excess of the total UAP. It is determined by subtracting the UAP from the arrears collection.

PASS-ON: A pass-on payment is the amount of the current support that is in excess of the current federal Foster Care assistance payment made in the month. This amount must be paid to the county welfare department (i.e., the agency responsible for the placement and care of the child). A pass-on payment is determined by subtracting the current federal Foster Care (Title IV-E) assistance payment from the current support. If a balance of current support remains, that amount is pass-on.

Disregard is an amount up to $50.00 per month of the current support payment (child/family/spousal) either court ordered or voluntary, which is to be paid to each current CalWORKs/KinGAP assistance unit. If less then $50.00 of current support is collected, the entire amount is disregarded. One disregard is paid per assistance unit per month and only when a current support collection is received in a current CalWORKs/KinGAP assistance case. In cases in which a single payee is caring for multiple KinGAP children, each child would receive a disregard from the current support payment(s) received. Disregard is not authorized for a collection designated as an arrears collection or for a federal or non-federal Foster Care case.

Total recoupment is the amount of the support that will be used to reimburse, in whole or in part, the total UAPs for each current assistance program.

NOTE: All transactions will be reported in the month in which they took place according to the status of the case on the legal date of collection. Examples: Collections received on a former assistance case that relate back to a legal date of collection when the case was currently assisted should be reported in the current assistance cases (Section C). Also, adjustment and cancellations of disregards issued while the case was currently assisted should be reported in the current assistance cases (Section C).

Non-IV-D Case. Any child support enforcement case in which the CP has neither assigned his or her rights to receive support to the State nor has filed an application for child support services available under Title IV-D.

Fees And Other Non Required Dollars For Reporting. Any distribution to fees (e.g., genetic test fees), or LCSA specific reimbursements will be treated as a reduction of the collection in CS 35 from which it was originally reported. If the monies were never reported then the reduction to CS 35 is not performed.

Collections Returned to Payor(s). Amounts collected which are subsequently reversed and returned to a payor and have previously been reported to the State should reduce the collection source where the collection was originally reported. For example, the amount reported as collections made by liens on the CS 35 would be reduced by the amount of a collection made by liens that is returned to a payor.

Forwarding Inter-County Collections. Amounts collected by your LCSA which are subsequently forwarded to other California counties and have been previously reported to the State should reduce the collection source where the collection was originally reported. Record this entry in the month that the collection is forwarded (i.e., disbursed). NOTE: When a LCSA

forwards a collection to another California LCSA, the forwarding LCSA must identify to the receiving LCSA the original collection source and date of collection.

Receiving Inter-County Collections. Amounts received from other California counties should be posted in the appropriate collection source box based on the original source of collection.

Completing All Entries. All non-shaded line items on the form in Sections A through E are to be completed for each month. All data elements must be reported. Using "Not Available" (NA) or "Not Applicable" (NAP) is not allowed.

NOTE: Additionally, "summary" cells or cells with calculations will remain non-shaded cells with electronic upload cross checks that will not allow the file to be submitted unless the cell entry is correct. Applicable cells will be referenced in the instructions as "summary cell".

Due Dates: This report must be electronically submitted and approved no later than the fifteenth calendar day of the month following the report month, e.g., the August report is sent no later than September 15.

The **Supplement to the CS 34 Monthly Report of Collections and Distributions (CS 35)** is a fiscal document. LCSAs may be considered out of compliance if the approved report is not received electronically by **Department of Child Support Services (DCSS)** by the close of business on the day it is due. **All data included on the CS 35 must be complete and accurate.** Delayed or late reports may result in the withholding of LCSA Administrative Funding.

NOTE: LCSAs are required to have case level detail documentation for an audit trail to support the amounts reported on the CS 35. The format for this documentation is contained in the Functional Requirements Document (FRD). The case level detail documentation shall be kept at the local level and made available upon request for federal and state auditors, program reviewers and DCSS. The required retention period for the CS 35 and detail documentation is four years and four months, unless legal action is in progress requiring longer retention.

CHILD SUPPORT SERVICES
SUPPLEMENT TO THE CS 34 MONTHLY REPORT OF COLLECTIONS AND
DISTRIBUTIONS (CS 35)

Local child support agencies administering the Child Support Services Program under Title IV-D of the Social Security Act are required to complete and submit this report **monthly** in accordance with instructions issued by the California Department of Child Support Services (DCSS).

All amounts reported must be actual collection amounts and <u>not</u> rounded to the nearest whole dollar.

Box 1   **COUNTY NAME** - Enter the reporting county name.

Box 2   **COUNTY FIPS CODE** – Enter the county Federal Information Processing Standards (FIPS) Code.

Box 3   **REPORT MONTH/YEAR** - Enter the month/year of the effective date of the transaction.

Box 4   **REPORT TYPE** – Check either initial report or revised report, as appropriate.

SECTION A: COLLECTIONS BY OTHER REPORTING SOURCES

Section A provides detailed itemization of the collections reported on the **CS 34, Section A, Line 2, Item 2g, Box 13.**

Line 1, Box 5. Enter the amount received as a result of liens against personal and real property and adjustments to previous months. Do not include amounts received through the California Insurance Intercept Project.

Line 2, Box 6. Enter the amount received as a result of workers' compensation settlements and adjustments to previous months. Do not include amounts received through the California Insurance Intercept Project.

Line 3, Box 7. Enter the amount received as a result of Disability Insurance Benefits (DIB) and adjustments to previous months.

Line 4, Box 8. Enter the amount received as a result of Franchise Tax Board (FTB) full collection (non tax) other than earnings withholdings, and adjustments to previous months.

Line 4a, Box 191. Enter the amount received from California Insurance Intercept Project (CIIP) and adjustments to previous months.

Line 5, Box 192. Enter the amount received as a result of other sources not listed above and adjustments to previous months.

Line 6, Box 10. Total. **Sum (Box 5+6+7+8+191+192) "Summary cell"**

NOTE: Box 10, must equal the CS 34, Box 13, and also must equal the sum of Boxes 5+6+7+8+191+192).

SECTION B. NET AMOUNT OF INCREASING AND DECREASING ADJUSTMENTS

Line 7, Box 11. Any entry necessary to correct a previous report that cannot be corrected with an entry on the original reporting line. **This line should frequently be zero**. An entry on this line may be a negative number. If there is an amount other than zero ($0.00), the explanation will be required on line 7 of the form on the website. The Director or designee must provide the explanation on-line.

NOTE: This Adjustment Amount must equal the CS 34, Section A, Line 3 , Box 14. Any entry on this line MUST be thoroughly explained on the CS 35, Section B, Line 7 (Detailed Explanation). In addition, the contact person should be able to explain the necessity of any entry when contacted by State or federal auditors or program reviewers.

SECTION C. DISTRIBUTION TO CURRENT ASSISTANCE CASES

Section C is used to record the distributions made to current assistance cases. A **current assistance case** is a Title IV-D case that is currently receiving public assistance under CalWORKS/KinGAP, federal Foster Care (Title IV-E) or non-federal Foster Care assistance programs. For distribution purposes on the CS 35 report, all state only cases (including non-federal Foster Care cases) currently receiving public assistance are also included as current assistance cases. (Lines 10, 11,14)

Federal CalWORKS.

Line 8, Box 12. Amount of Distributed Collections: Enter the total amount of distributed collections for federal CalWORKS. Includes: excess and all recoupment (which includes disregard).

Line 8, Box 13. Excess - Enter the total amount of excess for each current assistance program.

Line 8, Box 14. Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system (includes disregard). **NOTE**: **Box 14 must equal Box 12 minus (–) Box 13. "Summary cell"**

Line 8, Box 15. Federal Share - The federal share of recoupment is calculated by multiplying the Total Recoupment **(box 14)** for each current assistance program by the Federal Medical Assistance Percentage (FMAP). **"Summary cell"**

Line 8, Box 16. County Share - The county share of recoupment is calculated by multiplying the Total Recoupment **(box 14)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 8, Box 17. Not used.

Line 8, Box 18. State Share - The state share of recoupment is calculated by multiplying the Total Recoupment **(box 14)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

Federal KinGAP

Line 9, Box 19. Amount of Distributed Collections - Enter the total amount of distributed collections for each current assistance program. Includes: excess, and all recoupment (which includes disregard).

Line 9, Box 20. Excess. - Enter the total amount of Excess for each current assistance program.

Line 9, Box 21. Amount of Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system (includes disregard). NOTE: Box 21 **must equal Box 19 minus (–) Box 20. "Summary cell"**

Line 9, Box 22. Federal Share - The federal share of recoupment is calculated by multiplying the Total Recoupment **(box 21)** for each current assistance program by the FMAP. **"Summary cell"**

Line 9, Box 23. County Share - The county share of recoupment is calculated by multiplying the Total Recoupment **(box 21)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 9, Box 24. State Share - The state share of recoupment is calculated by multiplying the Total Recoupment **(box 21)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

State (.9750) CalWorks)

Line 10, Boxes 25 – 29. are used to report amounts related to aid programs where the sharing ratios are .9750 state share and .0250 county share.

Line 10, Box 25. Amount of Distributed Collections - Enter the total amount of distributed collections for each current assistance program. Includes: excess, and all recoupment (which includes disregard).

Line 10, Box 26. Excess - Enter the total amount of Excess for each current assistance program.

Line 10, Box 27. Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system (includes disregard). **Must equal Box 25 minus (–) Box 26. "Summary cell"**

Line 10, Box 28. County Share - The county share of recoupment is calculated by multiplying the Total Recoupment **(box 27)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 10, Box 29. State Share - The state share of recoupment is calculated by multiplying the Total Recoupment **(box 27)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

State (.9500) CalWORKS

Line 11, Boxes 30 – 34, are used to report amounts related to aid programs where the sharing ratios are .9500 state share and .0500 county share.

Line 11, Box 30. Amount of Distributed Collections - Enter the total amount of distributed collections for each current assistance program. Includes: excess and all recoupment (which includes disregard).

Line 11, Box 31. Excess - Enter the total amount of Excess for each current assistance program.

Line 11, Box 32. Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system (includes disregard). **Must equal Box 30 minus (–) Box 31. "Summary cell"**

Line 11, Box 33. County Share - Enter the amount of the county share of recoupment. The county share of recoupment is calculated by multiplying the Total Recoupment **(box 32)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 11, Box 34. State Share - Enter the amount of the state share of recoupment. The state share of recoupment is calculated by multiplying the Total Recoupment **(box 32)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

State KinGAP

Line 12, Box 35. Amount of Distributed Collections - Enter the total amount of distributed collections for current assistance program. Includes: excess and all recoupment (which includes disregard).

Line 12, Box 36. Excess - Enter the total amount of Excess for each current assistance program.

Line 12, Box 37. Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system (includes disregard). **Must equal Box 35 minus(–) Box 36. "Summary cell"**

Line 12, Box 38. County Share - Enter the amount of the county share of recoupment. The county share of recoupment is calculated by multiplying the Total Recoupment **(box 37)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 12, Box 39. State Share - Enter the amount of the state share of recoupment. The state share of recoupment is calculated by multiplying the Total Recoupment **(box 37)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

Federal Foster Care

Line 13, Box 40.   Amount of Distributed Collections - Enter the total amount of distributed collections for each current assistance program. Includes: excess, pass on and all recoupment.

Line 13, Box 41. Excess - Enter the total amount of Excess for Federal Foster Care.

Line 13, Box 42. Pass On. Enter the amount of pass-on for federal Foster Care. A pass-on payment is the amount of the current support that is in excess of the current federal Foster Care assistance payment made in the month. This amount must be paid to the county welfare department (i.e., the agency responsible for the placement and care of the child). A pass-on payment is determined by subtracting the current Foster Care (Title IV-E) assistance payment from the current support. If a balance of current support remains, that amount is entered here as Pass-on.

Line 13, Box 43. Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal [(Box 40 minus (–) sum (Box 41 plus (+) Box 42)] "Summary cell"**

   NOTE: Box 43 amount must equal the amount on CS 34, Line 7a, Box 23.

Line 13, Box 44. Federal Share - Enter the amount of the federal share of recoupment. The federal share of recoupment is calculated by multiplying the Total Recoupment **(Box 43)** for each current assistance program by the FMAP. **"Summary cell"**

   NOTE: Box 44 amount must equal the amount on CS 34, Line 10a, Box 45.

Line 13, Box 45. County Share. - Enter the amount of the county share of recoupment. The county share of recoupment is calculated by multiplying the Total Recoupment **(Box 43)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 13, Box 46. State Share - Enter the amount of the state share of recoupment. The state share of recoupment is calculated by multiplying the Total Recoupment **(Box 43)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

Non Federal Foster Care

Line 14, Box 47. Amount of Distributed Collections - Enter the total amount of distributed collections for each current assistance program. Includes: excess and all recoupment.

Line 14, Box 48. Excess - Enter the total amount of Excess for each current assistance program.

Line 14, Box 49. Total Recoupment - Enter the amount of total recoupment. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 47 minus (–) Box 48. "Summary cell"**

Line 14, Box 50. County Share - The county share of recoupment is calculated by multiplying the Total Recoupment **(Box 49)** for each current assistance program by the County Sharing Ratio. **"Summary cell"**

Line 14, Box 51. State Share - The state share of recoupment is calculated by multiplying the Total Recoupment **(Box 49)** for each current assistance program by the State Sharing Ratio. **"Summary cell"**

TOTALS

Line 15, Box 52. Total Amount Distributed - Enter the total amount of Amount of Distributed Collections. **Sum (Boxes 12+19+25+30+35+40+47). "Summary cell"**

Line 15, Box 53. Total Excess - Enter the total amount of Excess. **Sum (Boxes 13+20+26+31+36+41+48). "Summary cell"**

Line 15, Box 54. Total Pass on - Enter the total amount of Federal Foster Care Pass on. **Box 42. "Summary cell"**

Line 15, Box 55. Total Recoupment - Enter the total amount of Total Recoupment. **Sum (Boxes 14+21+27+32+37+43+ 49) "Summary cell"**

Line 15, Box 56. Total Federal Share - Enter the total amount of the Federal Share **Sum (Boxes 15+22+44). "Summary cell"**

Line 15, Box 57. Total County Share - Enter the total amount of the County Share. **Sum (Boxes 16+ 23+28+33+38+45+50). "Summary cell"**

Line 15, Box 58. Total State Share - Enter the total amount of the State Share. **Sum (Boxes 18+ 24+29+34+39+46+51). "Summary cell"**

Line 16, Box 59. Disregard Paid This Month - Enter the total amount paid as disregard for this reporting month.

Line 16, Box 60. State Share of Recoupment - Enter total from **Box 58. "Summary cell"**

Line 16, Box 61. Adjusted State Share - Enter the amount of the adjusted state share. The adjusted State share is calculated by subtracting the Disregard Paid this Month from the State Share of Recoupment. **Box 60 minus (–) Box 59. "Summary cell"**

SECTION D. DISTRIBUTION TO FORMER ASSISTANCE CASES

Section D is used to record distributions to former assistance cases. A former assistance case is a Title IV-D case which is not currently but has in the past received public assistance under CalWORKS/KinGAP, federal Foster Care (Title IV-E) or non-federal Foster Care assistance programs. For distribution purposes on the CS 35 report, all state only cases (including non-federal Foster Care cases) formerly receiving public assistance are also included as former assistance cases. (lines 19, 20, and 23)

Federal CalWORKS

Line 17, Box 62. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program in former assistance cases. Includes: excess and all recoupment.

Line 17, Box 63. Excess - Enter the amount of excess for each former assistance program.

Line 17, Box 64. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 62 minus (–) Box 63. "Summary cell"**

Line 17, Box 65. Federal Share - The federal share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 64)** by the FMAP. **"Summary cell"**

Line 17, Box 66. County Share - The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 64)** by the County Sharing Ratio. **"Summary cell"**

Line 17, Box 67. State Share - The state share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 64)** by the State Sharing Ratio. **"Summary cell"**

Federal KinGAP

Line 18, Box 68. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program. Includes: excess and all recoupment.

Line 18, Box 69. Excess - Enter the amount of excess for each former assistance program.

Line 18, Box 70. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 68 minus (–) Box 69. "Summary cell"**

Line 18, Box 71. Federal Share - The federal share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 70)** by the FMAP. **"Summary cell"**

Line 18, Box 72. County Share - The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 70)** by the County Sharing Ratio. **"Summary cell"**

Line 18, Box 73. State Share - The state share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 70)** by the State Sharing Ratio. **"Summary cell"**

State (.9750) CalWorks

Line 19, Boxes 74 – 78, are used to report amounts related to aid programs where the sharing ratios are .9750 state share and .0250 county share.

Line 19, Box 74. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program. Includes: excess and all recoupment.

Line 19, Box 75. Excess - Enter the amount of excess for each former assistance program.

Line 19, Box 76. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 74 minus (–) Box 75. "Summary cell"**

Line 19, Box 77. County Share . The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(box 76)** by the County Sharing Ratio. **"Summary cell"**

Line 19, Box 78. State Share. The state share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(box 76)** by the State Sharing Ratio. **"Summary cell"**

State (.9500) CalWORKS

Line 20, Boxes 79 – 83, are used to report amounts related to aid programs where the sharing ratios are .9500 state share and .0500 county share.

Line 20, Box 79. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program. Includes: excess and all recoupment.

Line 20, Box 80. Excess - Enter the amount of arrears excess for each former assistance program.

Line 20, Box 81. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 79 minus (–) Box 80. "Summary cell"**

Line 20, Box 82. County Share - The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(box 81)** by the County Sharing Ratio. **"Summary cell"**

Line 20, Box 83. State Share. The state share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(box 81)** by the State Sharing Ratio. **"Summary cell"**

State KinGAP

Line 21, Box 84. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program. Includes: excess and all recoupment.

Line 21, Box 85. Excess - Enter the amount of excess for each former assistance program.

Line 21, Box 86. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 84 minus (–) Box 85. "Summary cell"**

Line 21, Box 87. County Share - The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 86)** by the County Sharing Ratio. **"Summary cell"**

Line 21, Box 88. State Share - The state share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 86)** by the State Sharing Ratio. **"Summary cell"**

Federal Foster Care

Line 22, Box 89. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program. Includes: excess and all recoupment.

Line 22, Box 90. Excess - Enter the amount of excess for each former assistance program.

Line 22, Box 91. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 89 minus (–) Box 90. "Summary cell"**

Line 22, Box 92. Federal Share - The federal share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 91)** by the FMAP.

Line 22, Box 93. County Share - The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 91)** by the County Sharing Ratio. **"Summary cell"**

Line 22, Box 94. State Share - The state share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(Box 91)** by the State Sharing Ratio. **"Summary cell"**

Non-Federal Foster Care

Line 23, Box 95. Amount of Distributed Collections - Enter the total amount of distributed collections for each former assistance program. Includes: excess and all recoupment.

Line 23, Box 96. Excess - Enter the amount of excess for each former assistance program.

Line 23, Box 97. Total Recoupment - Enter the amount of total recoupment for each former assistance program. Total recoupment will be derived from transaction detail in the Consortium system. **Must equal Box 95 minus (–) Box 96. "Summary cell"**

Line 23, Box 98. County Share - The county share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(box 97)** by the County Sharing Ratio.

Line 23, Box 99. State Share - The State share of recoupment for each former assistance program is calculated by multiplying the Total Recoupment **(box 97)** by the State Sharing Ratio.

TOTALS

Line 24, Box 100. Total - Enter the total amount of Amount of Distributed Collections.
Sum (Boxes 62+68+74+79+84+89+95). "Summary cell"

Line 24, Box 101. Total - Enter the total amount of Excess.
Sum (Boxes 63+69+75+80+85+90+96). "Summary cell"

Line 24, Box 102. Total - Enter the total amount of Total Recoupment.
Sum (Boxes 64+70+76+81+86+91+97). "Summary cell"

Line 24, Box 103. Total - Enter the total amount of the Federal Share.
Sum (Boxes 65+71+92). "Summary cell"

Line 24, Box 104. Total - Enter the total amount of County Share.
Sum (Boxes 66+ 72+77+82+87+93+98). "Summary cell"

Line 24, Box 105. Total - Enter the total amount of State Share.
Sum (Boxes 67+ 73+78+83+88+94+99). "Summary cell"

SECTION E. UNDISTRIBUTED COLLECTIONS

This section includes all collections in the possession of the LCSA on the last day of the month. All categories are time sensitive and detailed aging of categories is required. CS 34, Section B, Line 9b, Box 43 must equal the CS 35, Section E, Line 36. Box 189. All figures must be actual and not rounded.

For Aging (Section E) – All dates are relative to the <u>original</u> date of receipt, i.e. when the payment came into possession of the local child support agency (LCSA), except as noted otherwise. Stale dated checks are the exception.

Line 25, Boxes- 106 to 111. Child Support Payments Processed and not yet Certified for Issuance –
Funds in this line item are payments that have been processed and, as of the end of the month, are pending disbursement, including interstate transfers processed (but not intercounty transfers which are reported on line 34) but not yet certified for check issuance.

Corresponds to OCSE 34A line item: 9c Undistributed Collections Pending Distribution – (i) Collections that were received within the past two business days following receipt.

Line 25, Box 112. Total of Child Support Payments Processed and not yet Certified for Check Issuance. "Summary cell"

Line 26, Boxes 113 to 118. Child support payments processed but not yet transferred to TANF or Foster Care agency – Funds on this line are those that will be dispersed for public assistance recoupment. Distributions to the Title IV-A and Title IV-E programs must be completed before the first of the month following the month of collection.

Corresponds to OCSE 34A line item: 9c Undistributed Collections Pending Distribution – (v) collections processed, but not yet transferred to other state or federal agencies

Line 26, Box 119. Total of Child Support Payments Processed and not yet transferred to TANF or Foster Care agency.   "Summary cell"

Line 27, Boxes 120 to 125. Collections for CP that are Unable to be Disbursed – Funds in this line item are those that cannot be disbursed to the CP**,** such as, payments that are undeliverable.   The LCSA shall attempt to locate the obligee for a period of six months using the appropriate locate sources.   After six months of unsuccessful locate services the payment transaction shall be reversed and the funds returned to the NCP.

Corresponds to OCSE 34A line item: 9d Undistributed Collections Unresolved – (ii) Collections pending the location of the custodial or noncustodial parent and (iv) collections with inaccurate or missing information.

Note: The aging of UDC does not pertain to how long the money is in a particular category. For example, if, after 6 months of unsuccessful locate attempts, the

transaction is reversed and the money moves to line 29, box 138 until the money is returned to the NCP.

Line 27, Box 126. **Total of Collections for CP that are Unable to be Disbursed. "Summary cell"**

Line 28, Boxes 127 to 132. Funds Held Due to Legal Disputes - Funds on this line are being held because of a dispute between parents and/or the LCSA (e.g., including but not limited to estate resolutions; contested paternity; contested tax, insurance, and pension intercepts; legal disputes; contested bank levies; contested seizures of lottery winnings, and other lump-sum seizures; etc.) and will be held for the duration of the dispute at which time funds will be disbursed to the obligor or obligee.

Corresponds to OCSE 34A line item: 9c Undistributed Collections Pending Distribution – (iv) Collections pending the resolution of a legal dispute, including any timely appeal.

Line 28, Box 133. Total of Funds Held Due to Legal Disputes. "Summary cell"

Line 29, Boxes 134 to 139. **Payments to be Returned to NCP -** Funds in this line item are those that are to be returned to the NCP**.** These items include undeliverable payments that could not be disbursed to the CP and are being returned to the obligor**,** refunds of over collections to the obligor**,** and undeliverable obligor payments. The LCSA shall attempt to locate the obligor for a period of six months using the appropriate locate sources for obligor payments or refunds that are undeliverable. After six months of unsuccessful locate services, the payment transaction shall be reversed and the funds shall be **designated** as undeliverable and moved to line item 33, Stale Dated / Uncashed Checks Being Held (NCP).

Corresponds to OCSE 34A line item: 9d Undistributed Collections Unresolved (ii) Collections pending the location of the custodial or noncustodial parent, and (iv) collections with inaccurate or missing information.

Line 29, Box 140. Total of Payments to be Returned to NCP . "Summary cell"

Line 30, Boxes 141 to 146. Unidentified Payments – Funds on this line are those payments that are unidentifiable and cannot be associated with any case.   The LCSA shall work the payment for six months in an attempt to identify the funds to a case. Funds remain on this line until identified to a case, returned to source, or escheated. Escheated funds must be reported on the CS 34, line (9a) Undistributable Collections Determined Undistributable and Abandoned. In accordance with Federal instructions, this amount is considered "program income" and must be included in the entry reported on the CS 356 Quarterly Administrative Expenditure Claim (AEC), Section VII, line B, cell 25 – Miscellaneous Program Income.

NOTE: Money reverted to the County General Fund remains child support program money and must come back to the LCSA (The LCSAs' Administrative Expenditure Claim will be offset by the additional program income).

Corresponds to OCSE 34A line item 9d Undistributed Collections Unresolved – (i) Unidentified collections.

Line 30, Box 147. Total of Unidentified Payments. "Summary cell"

Line 31, Boxes 148 to 153. Future Child Support Payments – Funds on this line are those that are collected in excess of the current and arrearage obligation which are held for future payments. There is no maximum timeframe for holding future payments.

Corresponds to OCSE 34A line item: 9c Undistributed Collections Pending Distribution (iii) Collections received and held for future support.

Line 31, Box 154. Total of Future Child Support Payments. "Summary cell"

Line 32, Boxes 155 to 160. Stale Dated / Uncashed Checks Being Held (CP) – Funds on this line are checks sent to a CP as a distribution of a child support payment that are not cashed and are considered "stale" and no longer negotiable. When the child support payment is determined to be a stale/uncashed warrant, LCSAs shall attempt to locate the obligee for a period of six months using the appropriate locate sources. After six months of unsuccessful locate services, the payment transaction shall be reversed and the funds shall be moved to line item 29 to be returned to the obligor.

Corresponds to OCSE 34A line item: 9d Undistributed Collections Unresolved – (iii) Collections initially disbursed by check that are uncashed and considered stale-dated and non-negotiable in accordance with State law and procedures.

Note: The aging of UDC does not pertain to how long the money is in a particular category. For example, if, after 6 months of unsuccessful locate attempts, the transaction is reversed and the money moves to line 29, box 138 until the money is returned to the NCP.

Line 32, Box 161. Total of Stale Dated / Uncashed Checks Being Held (CP). "Summary cell"

Line 33, Boxes 162 to 167. Stale Dated / Uncashed Checks Being Held (NCP). Funds on this line are checks sent to a NCP that were undeliverable, or NCP refunds that are not cashed and are considered "stale" and no longer negotiable. When the warrant is determined to be stale, LCSAs shall attempt to locate the obligor for a period of six months using the appropriate locate sources. Duration in this line item is dependent upon the date locate is initiated. The unclaimed funds shall be held in stewardship as follows:

If the unclaimed funds are less than $15.00 and the obligor was not located within the six months and funds remain unclaimed for an additional six months, the funds are escheated and transferred to the general fund of the county.

If the unclaimed funds are $15.00 or more and the obligor was not located within six months and the funds remain unclaimed for an additional two years, then the unclaimed funds are escheated and transferred to the general fund of the county.

These escheated funds must be reported on the CS 34, line (9a) Undistributable Collections Determined Undistributable and Abandoned. In accordance with Federal instructions, this amount is considered "program income" and must be included in the entry reported on the CS 356 Quarterly Administrative Expenditure Claim (AEC), Section VII, line B, cell 25 – Miscellaneous Program Income.

NOTE: Money reverted to the County General Fund remains child support program money and must come back to the LCSA. (The LCSAs' Administrative Expenditure Claim will be offset by the additional program income).

Corresponds to OCSE 34A line item: 9d Undistributed Collections Unresolved – (iii) Collections initially disbursed by check that are uncashed and considered stale-dated and non-negotiable in accordance with State law and procedures.

Line 33, Box 168. Total of Stale Dated / Uncashed Checks Being Held (NCP) /. "Summary cell"

Line 34, Boxes 169 through 174 – **Intercounty Transfers Processed but not yet Certified for Check Issuance** – Funds on this line are those intercounty collections that are being processed for check issuance to another California county.

Corresponds to OCSE 34A line item: 9d Undistributed Collections Pending Distribution, (v) collections processed, but not yet transferred to other state or federal agencies administering programs such as TANF, IV-E and non-IV-E (foster care), Medicaid, or S-CHIP.

Line 34, Box 175 – **Intercounty Transfers Processed but not yet Certified for Check Issuance**. **Sum (Boxes 169+170+171+172+173+174). "Summary cell"**

Line 35, Boxes 176 to 181. Other – This is for collections that are not appropriate in other categories. **Any entry in this item must be accompanied by an electronic explanation of what types of collections remain undistributed.**

Corresponds to OCSE 34A line item: 9d Undistributed Collections Unresolved – (v) Other collections remaining undistributed.

Line 35, Box 182. Total of Other. **"Summary cell"**

Line 36, Boxes 183 to 189. **Total** – This is the sum of the column for Lines 25 through 35. **"Summary cells"**

Line 37. **Text box** for detailed explanation of entries to Line 35 (Other). Details must be provided – explanations such as "other" or "unknown" are unacceptable.

Line 38, Box 190. Total Revenue Transfer to State.
Sum (Box 105 + Box 103 + Box 61 + Box 56). "Summary cell"

NOTE: Revenue transfer warrants are due to the State by the last calendar day of the month following the report month and must equal box 190.

SECTION F. CHILD/FAMILY/SPOUSAL COLLECTIONS DISTRIBUTED TO THE FAMILY

Line 39, Cell 213. In current CalWORKs assistance cases (mixed case statuses) – Enter amounts disbursed to families where there is at least one member of the IV-D case currently receiving CalWORKs assistance. These are amounts disbursed to families where there are members of the IV-D case in different case statuses. Do not report disregard, pass-on or excess collections, which are reported on the CS 35, Section C and/or D.

A current CalWORKs assistance case with different case statuses is when at least one member of the IV-D case is currently receiving CalWORKs assistance and another member is receiving Foster Care or qualifies as never assistance status.

The disbursements reported on this line include collections applied to the family's never assigned, unassigned during assistance, unassigned pre-assistance, and conditionally assigned arrearages (for a non-IRS collection made), as well as any current support paid on behalf of a member that is not currently aided. Do not report disbursement of disregard, pass-on or excess payments paid to the current assistance family as a result of collections being applied to assigned current support obligations, or arrearages that are permanently assigned, conditionally assigned (with an IRS collection), and temporarily assigned arrearages, which are reported elsewhere on the CS 35.

Line 40, Cell 214. In never assistance cases – Enter amounts of child/family and spousal support payments disbursed to families that have never received assistance under either Title TANF (IV-A), Foster Care (Title IV-E), or a State-run assistance program. (This line would include payments to families regardless of whether or not they have ever received Medicaid payments under Title XIX). This line would not include any payments reported on the CS 35, Section C or Section D.

Reporting Guidelines

Certification and Submission Requirements - LCSAs will use the automated process for preparing this report using the secured county Website at https://counties.dcss.ca.gov. For instructions on how to prepare and submit an electronic CS 35 report, click on the respective CS 35 Instructions within the secured county Website. By using the electronic IV-D Director "approval code", the IV-D Director certifies the CS 35 data is accurate and was compiled using the State's standard data definitions and processing rules. The CS 35 must be electronically transmitted and approved through the County Secure Website to the California DCSS no later than the 15th calendar day of the month following the report month.

Please mail payments and any inquiries to:

**Department of Child Support Services
Accounting and Fiscal Services Section**

P.O. Box 419064, MS 20
Rancho Cordova, CA 95741-9064
Telephone: (916) 464-5150

Revisions: Counties may request approval to revise previously submitted reports until the last day of the month following the report month. Requests should be directed to the address or phone number listed above.

Substitutes. The CS 35 is a required report and **NO SUBSTITUTES ARE PERMITTED**.

CHILD SUPPORT SERVICES
SUPPLEMENT TO THE CS 34 MONTHLY REPORT OF COLLECTIONS AND DISTRIBUTIONS

County Name 1)	County FIPS Code 2)	Report Month/Year 3)	4) Report Type: ☐ Intital ☐ Revised

Section A **Collections by Other Reporting Sources** **(from CS 34, Section A, Line 2, Item 2g)**

1	Collections made by the reporting county from liens	5)
2	Collections made by the reporting county from workers' compensation	6)
3	Collections made by the reporting county through the DIB offset	7)
4	Collections made by the reporting county from FTB non-tax	8)
4a	Collections made by the reporting county through CIIP Intercepts	191)
5	Collections made by the reporting county from other sources not listed above	192)
6	TOTAL	10)

Section B **Net Increasing or Decreasing Adjustments** **(from CS 34, Section A, Line 3)**

CS 34, Section A, Line 3 should only be used on an **EXCEPTION** basis where the adjustment could not be identified. A detailed explanation is required in the "text box" should there be an entry on this line. Adjustments necessary to correct the reporting of collections are made directly to CS 34, Section A, Line 2, Boxes 2a - 2g in the applicable box.

Detailed Explanation	**Adjustment Amount**
7	11)

Section C **Distribution to Current Assistance Cases**

	Assistance Program	Amount of Distributed Collections	Excess		Total Recoupment	Federal Share	County Share	State Share
8	Federal CalWorks	12)	13)		14)	15)	16)	18)
9	Federal KinGap	19)	20)		21)	22)	23)	24)
10	State (.9750) CalWorks	25)	26)		27)		28)	29)
11	State (.9500) CalWorks	30)	31)		32)		33)	34)
12	State KinGap	35)	36)		37)		38)	39)
			Excess	Pass On				
13	Federal Foster Care	40)	41)	42)	43)	44)	45)	46)
14	Non-Federal Foster Care	47)	48)		49)		50)	51)
15	**TOTAL**	52)	53)	54)	55)	56)	57)	58)

16	Disregard Paid This Month	59)		State Share of Recoupment (Box 58)	60)	Adjusted State Share	61)

CS 35 (10/01/03)V3

Section D	Distribution to Former Assistance Cases						
	Assistance Program	Amount of Distributed Collections	Excess		Total Recoupment	Federal Share	County Share	State Share
17	Federal CalWorks	62)	63)		64)	65)	66)	67)
18	Federal KinGap	68)	69)		70)	71)	72)	73)
19	State (.9750) CalWorks	74)	75)		76)		77)	78)
20	State (.9500) CalWorks	79)	80)		81)		82)	83)
21	State KinGap	84)	85)		86)		87)	88)

			Excess					
22	Federal Foster Care	89)	90)		91)	92)	93)	94)
23	Non-Federal Foster Care	95)	96)		97)		98)	99)
24	TOTAL	100)	101)		102)	103)	104)	105)

Section E	UNDISTRIBUTED COLLECTIONS (total MUST match CS 34 Line 9b)						
	CATEGORY	1 to 30 Days	31 to 60 Days	61 to 90 Days	91 to 180 Days	181 days - 2 years	2 years +	Total
25	Child support payments processed and not yet certified for check issuance. CS 34, Line 9c	106)	107)	108)	109)	110)	111)	112)
26	Child support payments processed but not yet transferred to TANF or Foster Care agency. CS 34, Line 9c	113)	114)	115)	116)	117)	118)	119)
27	Collections for the Custodial Parent that are Unable to be Disbursed. CS 34, Line 9d	120)	121)	122)	123)	124)	125)	126)
28	Funds held due to legal disputes. CS 34, Line 9c	127)	128)	129)	130)	131)	132)	133)
29	Payments to be returned to non-custodial parents. CS 34, Line 9d	134)	135)	136)	137)	138)	139)	140)
30	Unidentified Payments. CS 34, Line 9d	141)	142)	143)	144)	145)	146)	147)
31	Future child support payments. CS 34, Line 9c	148)	149)	150)	151)	152)	153)	154)
32	Stale Dated/Uncashed Checks Being Held (CP). CS 34, Line 9d	155)	156)	157)	158)	159)	160)	161)
33	Stale dated/Uncashed checks being held (NCP) CS 34, Line 9d	162)	163)	164)	165)	166)	167)	168)
34	Intercounty transfers processed and not yet certified for check issuance. CS 34, Line 9c	169)	170)	171)	172)	173)	174)	175)
35	Other (Provide Explanation): CS 34, Line 9d	176)	177)	178)	179)	180)	181)	182)
36	TOTAL	183)	184)	185)	186)	187)	188)	189)

Line 35 (Other)   Detailed Explanation

37	

38	Total Revenue Transfer Due to State	190)	

Section F	CHILD/FAMILY/SPOUSAL COLLECTIONS DISTRIBUTED TO THE FAMILY	
39	In Current CalWORKS assistance cases (mixed case statuses)	213)
40	In Federal and State Never Assistance Cases	214)

Signature, IV-D Agency Director	Date:	Signature, Approving County Official	Date:
Typed Name, Title, Agency	Date:	Typed Name, Title, Agency	Date: