

## TANF MONTHS USED - INSTRUCTIONS

**Purpose:** To provide staff with information on federally funded TANF benefits received by a participant in another state. Federally funded benefits are the only benefits that will count toward the 60-month lifetime limit. If benefits in the other state were paid out of state only money, then they do not count in the lifetime limit. This form is only completed for Temporary Assistance families and is used as an attachment to the Out-Of-State Claimant Information Request (IM-41).

**Number of Copies and Disposition:** The original will be completed by staff and sent to the state where information is being requested. A copy will be kept in the case record until the original is returned. When the original is returned the copy may be destroyed.

**Instructions for Completion:** The TANF Months Used form is to be completed by staff. It is only available as an E-form template. Enter the following information:

**Date of Request:** The date the form is being sent is entered here.

**Name:** The name of the participant is entered here.

**SSN or Immigration ID#:** The ssn or immigration id number of the participant is entered here.

**Birthdate or Other Identifying Information:** The birthdate or identifying information of the participant is listed here.

The fax number, name and telephone number of the staff member sending this document are to be completed at the bottom of the page.

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