
General Information Memorandum

ISD-GI 15-07

TO: ISD Employees
FROM: *MM* Marilyn Martinez, Acting Director, Income Support Division
RE: 2014 Annual Recipient Benefit Statements
DATE: January 28, 2015

This GI serves to inform staff that the 2014 Annual Recipient Benefit Statements have been mailed to all cash assistance recipients. The cash assistance recipients will receive the "Annual Recipient Benefit Statement," ISD 151 (sample attached, page 2). Cash assistance recipients must use this statement with filing their annual income tax returns.

If a cash recipient has not received an ISD 151, or it has been lost or mutilated, ISD staff may initiate a Manual Benefit Statement (sample attached, page 3), using the Benefit Issuance screen in ASPEN. The Manual Benefit Statement must be signed and dated by an ISD case worker, supervisor or County director and have the county office stamp on it.

Non-deliverable statements returned by the U.S. Postal Service shall be forwarded to the Central ASPEN Scanning Unit (CAASU) for handling.

If you have questions regarding this memorandum please contact Brandi E. Sandoval at (505) 827-7274 or brandi.sandoval@state.nm.us

Attachments: Annual Recipient Benefit Statement
Manual Benefit Statement



INCOME SUPPORT DIVISION
SOUTHEAST BERNALILLO COUNTY ISD
 1711 SE RANDOLPH RD
 ALBUQUERQUE NM 87106
 PHONE NUMBER: (800) 283-4485
 FAX NUMBER: (855) 804-8960



Case Number:
 Date: JANUARY 22, 2015
 ISD 151 Revised 09/27/12
 Income Support Division

NEW MEXICO HUMAN SERVICES DEPARTMENT
 PO BOX 830
 BERNALILLO NM 87004-0908


ALBUQUERQUE NM 87110

ANNUAL RECIPIENT BENEFIT STATEMENT



TAXPAYER COPY

This is a statement of assistance paid by the New Mexico Human Services Department to you and any other members of your family during the calendar year 2014 under your Tax ID number.

DIRECT FINANCIAL ASSISTANCE PAYMENTS

\$ 3648.00

This information is to be reported on line 07 of the rebate schedule of the New Mexico personal income tax form. Attach one copy of this statement to the completed rebate schedule and file with your state income tax form PIT-RC.

You are urged to file this statement as you may be entitled to a rebate from the state of New Mexico. If you need help to complete your state income tax form, call the nearest district office of the New Mexico Taxation and Revenue Department or your local Volunteer Income Tax Assistance (VITA) person.

ANNUAL RECIPIENT BENEFIT STATEMENT



STATE INCOME TAX COPY

This is a statement of assistance paid by the New Mexico Human Services Department to you and any other members of your family during the calendar year 2014 under your Tax ID number.

DIRECT FINANCIAL ASSISTANCE PAYMENTS

\$ 3648.00

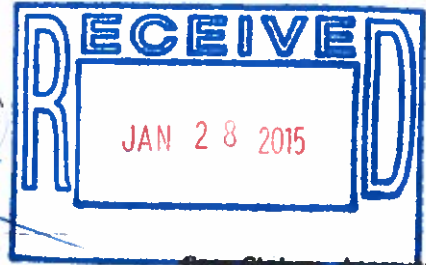
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You are urged to file this statement as you may be entitled to a rebate from the state of New Mexico. If you need help to complete your state income tax form, call the nearest district office of the New Mexico Taxation and Revenue Department or your local Volunteer Income Tax Assistance (VITA) person.





INCOME SUPPORT DIVISION
 CENTRAL OFFICE
 2009 S. PACHECO
 SANTA FE, NM
 87505



Benefit Summary Inquiry

Case Name: Cash Participant Case #: 123456789 Case Action: Case Status: Approved

Reset Search

Search Criteria

Case #: 120670580 EDG #: VENDOR ID: Grantee Id: Program Type: Cash Warrant/EFT #: EBT Benefit #:

Benefit Period Date Range

*Benefit Period Begin Date: 0/0/20 *Benefit Period End Date: 1/3/20

Search Results

Case Number	Grantee / Vendor Name	COE	Benefit Period	Benefit Type	Payment Amount	Recoupment Amount	Warrant/EFT / Benefit#	Warrant / EBT Available Date	Benefit Status
123456789	Cash Participant	TANF	01/01/2014 - 01/31/2014	Ongoing	\$304.00	\$0.00	C3345678	01/01/2014	Paid
123456789	Cash Participant	TANF	02/01/2014 - 02/28/2014	Ongoing	\$304.00	\$0.00	C3456789	02/01/2014	Paid

Benefit Summary Inquiry

Case Name: Cash Participant Case #: 123456789 Case Action: Case Status: Approved