FAX MESSAGE

PAYMENT RECLAMATION FORM

TO: Mary Freudenberg, Kelly Horne; FRBNY; FAX 201-531-3607				(Use one form per beneficiary.)
COUNTRY TO WHICH PMT. WERE SENT	**REQUESTED BY (SSA CONTACT)**	**REQUESTER'S PHONE**	**REQUESTER'S FAX**	**DATE OF REQUEST**

To FRBNY from SSA:
Please request reclamation of erroneous payments as shown below. The combined value of the outstanding payments is more than $100. Any payments after the date of death that have already been returned to SSA are listed in #6 and will not need to be reclaimed. After sending a request to the bank(s) to return erroneous payments made to the deceased beneficiary, please sign and date this form at #7 and fax it back.

To be filled out by SSA					**To be filled out by FRBNY**
1. Beneficiary's Name			6. The following payments after death have already been returned and do **not** need to be reclaimed.		7. Name of person who sent the request to the bank.
2. SSN/BIC					8. Date request went to bank.
3. Last Country of Residence			Pmt. Date	Pmt. Amount	9. Comments:
4. Date of Death					
5. Please **reclaim** these payments after death, which have not yet been returned to SSA	Date of payment:	Amount of payment:			
	Date of payment:	Amount of payment:			
	Date of payment:	Amount of payment:			

SSA INSTRUCTIONS: Do not request reclamation if FRBNY has already attempted to reclaim the payments; or if the total outstanding is under $100 U.S., or if there is a representative payee; or if another person is receiving benefits on the same SSN in the same bank account.

1. Print your name, fax number, and phone number in the requester's spaces at the top.
2. Print the date of your request.
3. Complete items 1-6. In #1, show the name of the beneficiary that is on the payee line of the MBR. Also show the name on the Benefit line of the MBR, if it is different from the Payee line.
4. In Item 5, list any payments after death that have not been returned to SSA. If you need more space, add a second sheet and mark "Continued" on the first sheet.
5. In Item 6, list any payments after death that have been returned to SSA.

FRBNY INSTRUCTIONS:

1. When you send the request to the bank, sign and date at #7 and add any necessary comments in #8.
2. When the bank returns the funds, return them to SSA and notify SSA that the reclamation is completed. If the bank does not respond, follow up in 30 days and notify SSA.