



# 1530.9: General Assistance Monthly Report and Request for State Funds (Form 787)

[SECTION I Active Ga Cases](#)

[SECTION II Assistance and Administrative Expenses for Reporting Month](#)

[SECTION III Local Revenues Received during Reporting Month](#)

[SECTION IV Computation of Request for State Funds](#)

[SECTION V Qualification for State Funds](#)

[SECTION VI Miscellaneous Information](#)

Complete this report monthly from Form 776 for Units currently receiving State funds. Submit the original and 2 copies to the DHS local office by the 5th workday of the following month. The DHS local office forwards Form 787 to OFS so that it is received by the 15th of the month.

## SECTION I Active Ga Cases

- enter the number of cases and persons for which general assistance was authorized for the month by program - Transitional Assistance or Family and Children Assistance.

## SECTION II Assistance and Administrative Expenses for Reporting Month

- enter the assistance and administrative expenses for the reporting month from Form 776. List assistance payments by program - TA or FCA. Recurring expenses are those which occur on a regular and ongoing basis. Examples of monthly recurring expenses are rent, utilities, salaries. Examples of expenses that are recurring but which do not occur on a monthly basis are quarterly payroll taxes and yearly insurance payments. An explanation is to be attached for all items included in "Non-Recurring Expenses".

## SECTION III Local Revenues Received during Reporting Month

**Line A** - Enter the surplus from Line IV.E. of Form 787 from the prior month.

**Line B** - Enter the taxes actually received during the month.

**Line C** - Enter the Tax Anticipation Warrants sold during the month.

**Line D** - Enter the revenues received from other funds.

**Line E** - Enter the interest income.

**Line F** - Enter the refunds and any other revenues.

## SECTION IV Computation of Request for State Funds

**Line A** - Enter the Total from Section II.

**Line B** - Enter the Total from Section III.

**Line C** - Enter the difference between Line A and Line B.

**Line D** - If applicable, enter the amount from Line 11 of Form 180 and any DHS charge-backs such as non-GA expenses, audit adjustments, pay-back to hospitals, etc.

**Line E** - NEED FOR STATE FUNDS/(SURPLUS)

## SECTION V Qualification for State Funds

**Line A** - Enter 2 times the amount on Line IV.A.

**Line B** - Enter the cash balance as shown in the accounting records at the end of the reporting

month.

**Line C** - If the amount on Line V.A. is greater than the amount on Line V.B., mark yes. The Unit is eligible for State funds. If the amount on V.A. is less than the amount on Line V.B., mark no. The Unit is not eligible for State funds.

## **SECTION VI Miscellaneous Information**

**Line A** - Enter the amount due to other local governmental funds (such as the General Town Fund).

**Line B** - Enter the amount due from other funds.

**Line C** - Enter the amount of State funds received during the reporting month. Include any special allocations received.

**Line D** - Enter the amount of tax anticipation warrants sold and redeemed during the month and the applicable tax year. Also enter the amount of tax anticipation warrants outstanding.

Form 787 should then be signed in Item VII and Item VIII by the Supervisor of GA or the Chairman of the Board of Commissioners.