REQUEST FOR A TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) PROTECTIVE PAYEE

It has been determined that you will have a protective payee for your TANF benefits, that person will be issued a HOOSIER WORKS CARD to receive TANF (*cash*) benefits at an Automatic Teller Machine (ATM) or participating stores.

TANF PROTECTIVE PAYEE REQUIREMENTS (PP)

If you have a Protective Payee, you will not be issued a Hoosier Works card for TANF. You must complete another copy of this form to choose another Protective Payee. Your choice must be approved by the DFR before another card is issued.

When a card is issued to the new Protective Payee, the previous Protective Payee will be canceled.

All information must be completed and approved by the DFR before your Proand receive a Hoosier Works card.	tective Payee can attend training
Case name	Case number
Address (number and street, city, state, and ZIP code)	Telephone number
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PROTECTIVE PAYEE FOR TEMPORARY ASSISTANCE FOR NEE	DY FAMILIES (TANF)
I, do hereby authorize to receive and use on behalf of my household the Hoosier Works card to obtain my Te (TANF) benefits.	mporary Assistance for Needy Families
Signature of recipient	Date (month, day, year)
Signature of TANF protective payee	Date (month, day, year)
Address of protective payee (number and street, city, state, and ZIP code)	Date of birth of protective payee (month, day, year)
The following information will only be used by the Hoosier Works Customer Service De Protective Payee. One of the following two (2) items must be completed to issue a card	
Mother's maiden name of protective payee	
1.	
Social Security number of protective payee (optional if mother's maiden name is given) (Social Security Act 1137(a)(1); 42 CFR 435.910; 7 CFR 273.6; 45 CFR 205.5;
2.	
Signature of authorized DFR representative	Date (month, day, year)