SIGNATURE

DATE

SUPPLEMENTAL SECURITY INCOME (SSI) RESOURCE TEST SELF-CERTIFICATION

DCSS 0046 (02/21/21)

If you receive monthly Social Security Disability Insurance (SSDI) or Social Security
Retirement (SSR) benefits and you have limited resources, you may qualify to have only
5% of your SSDI/SSR benefits attached for payment toward your past-due child support
(arrearage) balance. This SSI resource test will be used to determine if you qualify and/or
modify the support order.

NAME (Last) (First)	(Middle	(Middle Initial)	
MAILING ADDRESS			
CITY COUNTY	STATE	ZIP CODE	
PARTICIPANT IDENTIFICATION NUMBER	CHILD SUPPORT CASE NUMBER		
Resources:			
Things you own such as cash, bank accounts, land, life ins	surance, and personal p	property.	
Resources that DO NOT COUNT when deciding if you	meet the SSI resource	limit:	
 The home you live in and the land it is on 			
 Household goods and personal property that are no 	t worth more than \$2,0	00	
One wedding ring and one engagement ring			
The value of one automobile			
 Burial spaces for you and your spouse 			
 Burial funds up to \$1,500 			
 Life insurance worth \$1,500 or less 			
Resources such as wheelchairs, respirators, care see	ervices, etc.		
I do not have resources worth more than: (Please check one	2.)		
\$2,000 for one person			
☐ \$3,000 for a couple			
My monthly SSDI/SSR benefit amount is \$			
(Please attach a copy of your last SSDI/SSR benefit payment or paym	ent stub.)		
I declare under penalty of perjury under the laws of the foregoing is true and correct.	State of California th	at the	