TRACKING OF CHILD CARE SUBSIDY OVERPAYMENT/VIOLATIONS

Date of Referral	Case Name	Case Worker's Name	Name of Facility	*Reason for Over-payment	Time Period of Over-payment	Amount of Over-payment	Action Taken Due to Error /Violation by (Please Check-✓)			Date of Repayment/ Agreement	Date of Legal Action if Applicable	Amount Recovered		Name of Program Integrity Worker
							Parent/ RA	CC Provider	LPA			Amt.	Date	

***Reason for Overpayment (Please use the code indicated below.)**

- **IE-Inadvertent Error**
- **IPV-Intentional Program Violation**
- **AE-Administrative Error**

****Note: Funds cannot be recouped if parent/RA is younger than age 18 at the time of the overpayment.**