Documenting In-Kind Support and Maintenance (ISM)

For Supplemental Security Income (SSI) Claimants

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| **Name:** | |
| **DOB:** | **SSN:** |
| **SSI Application date:** | |
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Below, please document details regarding in-kind support and maintenance (ISM) provided to the above-named SSI claimant. This support may include, but is not limited to, money provided for rent or mortgage payments, housing or shelter provided at no cost, utility payments, room rent, real property taxes, heating fuel, gas, electric, sewerage, garbage collection service, gifts of food or meals. (Note: Clothing is NOT considered ISM)

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| --- | --- | --- |
| **Date of provision/receipt:** |  | |
| **Description of Services/Goods provided:** | |  |
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| **Current Market Value (CMV)\* of the Services/Goods:** |  |

*\*The price of an item on the open market in your locality*

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| --- | --- |
| **Payment (if any) made by the claimant:** |  |

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| --- | --- | --- | --- | --- |
| **The Services/Goods benefited whom? (Check one):** |  | **Only the claimant** |  | **Entire household** |

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**Contact Information for the person/entity providing the Services/Goods**

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| --- | --- | --- | --- | --- | --- |
| **Name of person/entity:** | | | | |  |
| **Address:** | |  | | | |
| **Phone number:** | | | |  | |
| **Signature:** | | |  | | |
| **Date:** |  | | | | |