

# THE JESSAMINE PLACE

## CONTRACT BETWEEN BENEFICIARY AND REPRESENTATIVE PAYEE OF SOCIAL SECURITY BENEFITS

I have discussed my needs with \_\_\_\_\_. I agree to have the Director of The Jessamine Place, serve as my representative payee for Social Security and/or SSI payments.

I will:

- Be clean and sober when I come to conduct business.
- Treat staff with courtesy and respect.
- Come to conduct business only on \_\_\_\_\_.
- Receive \$\_\_\_\_\_ for spending money every \_\_\_\_\_ as agreed.
- Sign a receipt when I receive my spending money.

I understand that if I fail to comply with these rules, the Director of The Jessamine Place may refuse to continue to serve as my representative payee.

\_\_\_\_\_ will:

- Treat me with courtesy and respect.
- Be available on \_\_\_\_\_ to meet with me.
- Use benefits received on my behalf to meet my current needs for food, clothing, and housing.
- Save any unused benefits, if any, for me in a way that clearly shows the funds belong to me.
- Account to Social Security Administration for how my money has been spent.
- Report to the Social Security Administration any events that may affect my eligibility for payments or the payment amount.
- Return to Social Security Administration any funds to which I am not entitled.

I, the beneficiary, have been informed neither The Jessamine Place nor the staff of The Jessamine may loan me money. This is prohibited by The Social Security Administration.

\_\_\_\_\_  
Beneficiary Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Organization Signature

\_\_\_\_\_  
Date