

## Centenarian Development Worksheet

### Telephone Interview

Centenarian: \*

SSN: xxx-xx-

Advanced Telephone Call Date: \*

Date letter sent: \*

F/u letter sent: \*

**If the Centenarian is Alive:**

1. Date of Interview:	*	
2. Date of Birth Correct?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. Address correct?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4. Payee needed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5. Change of payee needed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6. Special message posted:	<input type="checkbox"/> YES	
7. ID questions(s) used to establish identity:		

**If the Centenarian is Deceased:**

1. Date of Death (mm/dd/yyyy):	*	
2. Proof of Death type:	*	
3. Proof of Death posted to EVID?	<input type="checkbox"/> YES (mandatory)	
4. Date of Termination action:	*	
5. Was a payee involved?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6. Possible FRAUD involved?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7. OIG referral?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If no OIG referral, explain in REMARKS		
8. Estimated amount of overpayment:	*\$	
9. Special Message posted:	<input type="checkbox"/> YES	
10. REMARKS:		

**Paperwork Reduction Act Statement** - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 15 minutes to read the instructions, gather the facts, and answer the questions. ***Send only comments relating to our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401***