

Minnesota Department of Human Services

Schedule 2570

To: County  
Attention: Title IV-E Contact Person/ Fiscal Supervisor  
  
From: Rhonda Lord - Title IV-E Section (651) 431-3787

Title IV-E  
NON-REIMBURABLE CLAIMS  
444 Lafayette Road  
St. Paul, MN 55155-3810

05/30/2002  
  
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Date Sent: July 30, 2008 The Schedule 2570A must be received by the DHS Financial Operations Division within 45 days from the date sent (at left)  
Date Due: September 13, 2008 If additional information is insufficient to support a change, the invalid claim will remain non-reimbursable.  
Please provide complete information since this decision will be final.

Placement Type	Recipient Name RID No.	Date Of Birth	Age	Student Yes/No	Foster Home Name DHS License Number	Rule	Service From Provider Type	Service Thru	Difficulty of Care Points	Service Code	Paid Amount Paid Date	Cty Ref # State Ref #
Court Ordered	Abunga, Paul 12123456	08/15/1998	10		Rhonda Skybird 1024689	1	03/01/2008 Family	03/31/2008	10	Maintenance	\$625.00	0841592 982332
					Provider license is unknown.							
					Recipient age is not calculated correctly.							0851287
					Rhonda Skybird 1024689	1	04/01/2008 Family	04/30/200	10	Maintenance	\$575.00	982333
					Provider license is unknown.							
					Recipient age is not calculated correctly.							0861068
					Rhonda Skybird 1024689	1	05/01/2008 Family	05/31/2008	10	Maintenance	\$625.00	982334
					Provider license is unknown.							
					Recipient age is not calculated correctly.							

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