



BILLING FOR READER SERVICE INSTRUCTIONS

PURPOSE

To record billable reader service hours.

PREPARED BY

Reader completes the form and gives to the eligible individual who will verify for accuracy, sign and forward to the Vocational Rehabilitation (VR) Counselor. The form will be completed promptly at the end of each month.

INSTRUCTIONS

For the period: Enter the two-digit month and two-digit day and four-digit year the reader service period began.

To: Enter the two-digit month and two-digit day and four-digit year the reader service period ended.

Eligible Individual's Name: Print or type the eligible individual's name (first name, middle initial and last name).

Authorization Number: Enter the authorization number that will be utilized to make payment for reader service.

Partial/Final: Place an X in the appropriate box to indicate that payment being requested is partial or final.

Day of Month: Days are pre-filled. Do not write in this column.

Hours Read: Enter the amount of reader hours to corresponding day of reading.

Reader Name: Print or type the Reader's name (first name, middle initial and last name).

Social Security No: Enter the nine-digit social security number of the Reader.

Address: Enter the Reader's current street address, city, state and seven-digit zip code.

Hours Read: Enter the total number of hours for the specified time period.

At: Enter the financial hourly rate the Reader is being paid for reader service.

Gross: Enter the gross pay for the total number of hours the Reader provided reader service (hour read multiplied (x) by hourly rate).

FICA: Leave Blank

Net Pay: Leave Blank

Reader signs and dates the form stipulating that the reader service bill is correct and accurate.

Eligible Individual signs and dates the form stipulating that the reader service bill is correct and accurate.

Counselor initials and dates the information as correct and accurate.

DISTRIBUTION

Original and Copy: Controller's Office (Controller's Office mails a copy to the Reader with Check)

Copy: VR Counselor

Eligible Individual