



SAMS VERIFICATION STATEMENT

Vendor: _____

Reporting Period: _____

☐ Original Report(s)/Verification Statement

☐ Corrected or Revised Report(s)/Verification Statement

** Vendor – Complete and E-mail to Tucumcari Data Center WITH SIGNED Reports**

Data Entry

Reconcile Data

☐ Original data entered

☐ Data corrected/revised

☐ Corrected/revised report includes:
"Revised" in the report title.

☐ AAA-Agency Summary Report reconciled to data source

☐ AAA-NSIP Report reconciled to AAA-Agency Summary Report

☐ Documentation of reconciled data kept & maintained with file

Tracking Unregistered Consumer (if applicable)

☐ We did not have unregistered consumers in this reporting period

☐ Unregistered consumers and their number of units have been listed in the comment section of Service Delivery Detail

☐ Unregistered Service Delivery Detail printed and prepared to be submitted to Non-Metro AAA (along with ASR & NSIP reports)

☐ Year- to-Date Unregistered spreadsheet updated

☐ By Checking this box and typing my name below, I certify/attest that I have completed each data entry step as detailed above

Name: _____ Title: _____ Date: _____

** Non-Metro AAA Complete and Return to Vendor for Final Verification **

☐ AAA-Agency Summary Report (ASR) returned to Vendor

☐ AAA-NSIP Report (if applicable) returned to Vendor

☐ Unregistered Service Delivery Detail (if applicable) returned to Vendor

CC: _____ Date: _____

** Vendor – Complete and E-mail to Santa Fe Office and Tucumcari Data Center for Payment**

Action Required for Correct Reports:

Comments:

☐ The following reports have been signed/dated as correct:

☐ AAA-ASR Report

☐ AAA-NSIP Report (if applicable)

☐ Unregistered Service Delivery Detail (if applicable)

VENDOR must mail or e-mail to:
Non-Metro Area Agency on Aging
Attention: **Deidre Sandoval**
3900 Paseo Del Sol, Santa Fe, NM 87507
dsandoval@ncnmedd.com

Errors Discovered

- Errors made by providers based on inaccurate data or omitted data may need to be corrected the following month.
- Please briefly describe the discovered errors:

☐ I have reviewed the AAA report(s) for the month of _____, 20_____, and hereby submit for payment.

Name, Title: _____ Date: _____

** Non-Metro AAA Use Only **

☐ Signed/dated ASR scanned to ShareFile

☐ Signed/dated NSIP report scanned to ShareFile

☐ Signed/dated Unregistered Service Delivery Detail scanned to ShareFile

Name, Title: _____ Date: _____