Form **SSA-7004** (11-2017)
Discontinue Prior Editions
Social Security Administration

5. Your Sex: ☐ Male

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Request for Social Security Statement

Within four to six weeks after you return this form, we will send you:

- · a record of your earning history;
- an estimate of how much you have paid in Social Security taxes; and
- estimates of benefits you (and your family) may be eligible for now and in the future.

Please check this box if you want to get your *Statement* in Spanish instead of English.

Female

Please note: If you have received periodic *Social Security Statements* in the mail, this request may stop your next scheduled mailing.

We hope you will find the *Statement* useful in planning your financial future. Remember, Social Security is more than a program for retired people. Social Security is with you throughout life's journey. For example, it can help support your family when you die and pay you benefits if you become severely disabled.

If you have questions about Social Security or this form, please call our toll-free number, **1-800-772-1213 (TTY 1-800-325-0778)**

lease print or type your answers. When you have completed the form, mail it to:
Social Security Administration Wilkes Barre Direct Operations Center P.O. Box 7004 Wilkes Barre, PA 18767-7004
Name shown on your Social Security card:
First Name: Middle Initial:
Last Name only:
Your Social Security number as shown on your card:
Your date of birth
Other Social Security numbers you have used:

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Privacy Act Statement Collection and Use of Personal Information

Sections 205 (a), 205 (c)(2)(A) and 1143 (a)(2) of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent the issuance of a Social Security statement.

We will use the information to accurately identify your Social Security earnings record, extract the recorded earnings history, and to produce the requested statement. We may also share your information for the following purposes, called routine uses:

- 1. To Federal, State, or local agencies for the purpose of validating Social Security numbers used in administering cash or non-cash income maintenance or health maintenance programs; and
- 2. To Federal, State, or local agencies for determining alien applicants' eligibility for benefit programs.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notices (SORNs) 60-0059, entitled Earnings Recording and Self-Employment Income System, and 60-0224, entitled SSA-Initiated Personal Earnings and Benefit Estimate Statement. Additional information and a full listing of all our SORNs are available on our website at www.socialsecurity.gov/foia/bluebook.

Paperwork Reduction Act Statement

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the <u>Paperwork Reduction Act of 1995</u>. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. We estimate that it will take about 5 minutes to read the instructions, gather the facts, and answer the questions. **Send <u>only</u> comments relating to our time estimate above to:** SSA, 6401 Security Blvd, Baltimore, MD 21235-6401.