

## E-gov Postentitlement Survey Prenotice Letter – Payee Segment

[NAME]  
[ADDR1]  
[ADDR2]  
[ADDR3]

Dear [NAME]:

The Social Security Administration strives to provide you with the best service possible. Our records show that you receive benefits on behalf of a Social Security or supplemental security income (SSI) beneficiary. We are conducting a survey to find out how you as a representative payee prefer to do business with us.

A few days from now, an interviewer from [contractor], an opinion research company, will be calling to ask you to take part in our survey. Please be assured that [contractor] is bound by law to keep your answers completely confidential. Your survey responses will be given only to my staff here at Social Security and will not be used for any other purpose. Your participation in this survey will not affect the recipient's benefits or any business you may have with Social Security. (See the back of this letter for information about the privacy of survey information and the length of time it will take to complete the survey.)

The telephone number we have for you is [### ###-####]. If this number is incorrect or if there is another number that is more convenient for you, please contact [contractor] toll-free at [#-###-###-####] to give them that number.

If you want information about the survey, you can call my staff here at Social Security toll-free at 1-888-772-2010. Please leave a message with your name and telephone number (including the area code) and your call will be returned. If you have a question about the benefits you receive as a representative payee, please call Social Security's toll-free information line at 1-800-772-1213. (Neither my staff nor the interviewers at [contractor] can answer questions about Social Security benefits.)

The survey will only take about 15 minutes to complete and it can be scheduled at your convenience. While your participation is voluntary, we hope you will take the time to be in the survey because your opinion matters. Your answers and comments will help Social Security serve you better.

Sincerely,

Kelly Croft  
SSA, Chief Quality Officer

## **PRIVACY ACT STATEMENT**

The Social Security Administration is authorized to collect the information for this survey under Executive Order 12862, "Setting Customer Service Standards". Your response to these questions is strictly voluntary. The information you provide will be used to help us improve the service that we give you. Your response will not be disclosed to any other government or private agency.

## **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 have a valid Office of Management and Budget control number: The OMB control number for this survey is **0960-0526**. We estimate that it will take about 15 minutes to complete the actual phone survey. This includes the time it will take to listen to the questions and give your responses. You may send comments on our time estimate above to: Social Security Administration, 1338 Annex Building, Baltimore, MD 21235-0001. *Send only comments relating to our time estimate to this address.*