Addendum to the Supporting Statement for SSA-1199-(Country) International Direct Deposit 31 CFR 210 OMB No. 0960-0686

Justification for Non-Substantive Change to the Collection

We decided to make minor changes to our 1199 forms in an attempt to make them more userfriendly and standardized. There are no changes to the instructions on pages two & three. The changes made are minor and will only affect the placement of the information currently on the document. These changes will allow a more unified appearance, which we hope will make them easier to read. These changes were not included in our previous submission because we had not received feedback from the processing centers on the new form prior to submission. The feedback we received from the processing centers raised some concerns about the placement of the information on the document. After several meetings with FRBNY and the Office of International Operations (OIO), we came up with a more cohesive document which we feel will reduce errors and to help streamline the enrollment process.

Introduction Section

Instruction Section under form title: Separated instructions into 3 bullets

Old Language:

Please complete and sign Sections 1 and 2. **Sign your name.** Ask your bank to complete Section 3. Mail the completed form in the envelope provided.

New Language:

- Complete Section 1 and "SIGN YOUR NAME."
- Ask your bank to complete Section 3.
- Mail completed form back using address in Section 2

SECTION 1

• Removed Section 1 from box and made header (center alignment), and added phrase "TO BE COMPLETED BY PAYEE " in parenthesis.

Old Language:

Name and Complete Mailing Address

New Language: (TO BE COMPLETED BY PAYEE)

- Name and Mailing Address Section- Removed the street, apartment, city, province, postal code, country, and box with statement "Sign up now for International Direct Deposit. Your benefits will be delivered <u>safely and on time!"</u>
- Rearrange boxes to include a box for the Name and Complete Mailing Address, Telephone Number; Social Security Claim Number, spaces for numbers; Name of Person Entitled to the Benefits, space to include name; This Box is for Allotment of Payment Only, two spaces for Type And amount.
- Combined Section 2 information with Section 1. Section 1 now has PAYEE CERTIFICATION, JOINT ACCOUNT HOLDER'S CERTIFICATION, and This Account is section with check boxes for My own Account or A joint account.

Section 2

- Header is center aligned and added phrase Mailing Address in parenthesis.
- Removed previous information from this section to Section 1.
- Added two boxes to Section 2: Government Agency Name & a Mail Completed Forms to: box with the address of the Embassy/Consulate for that country.

Section 3

Made Section 3 center aligned and changed language in parenthesis.

Old Language:

SECTION 3 (Ask your bank to complete this section.)

New Language:

Section 3 (TO BE COMPLETED BY YORU FINANICAL INSTITUTION

Rearranged the following boxes: Name of Bank, Bank Phone Number, Address of Bank, Print Name of Bank Officials, Signature of Bank Official, Bank Code, Account Number, and IBAN.