



Request an application today by completing the information on the back of this card.

Privacy Act Statement

Social Security can collect the information on this form under section 205 of the Social Security Act. We need this to follow up on your application for Extra Help. Giving us this information is voluntary. However, without it we may not be able to properly help you. Neither the Social Security Administration nor its contractor will use the information for any other purpose.

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 display a valid Office of Management and Budget control number. We estimate that it will take about 1 minute to read the instructions and complete the form. You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. *Send only comments relating to our time estimate to this address, not the completed form.*

