





**MySocialSecurity.gov Portal**  
(Access to iBEVE Application post ROME Authentication)

John Q. Public | [Sign Out](#) Text Size  | [Accessibility Help](#)



# Social Security

 [My Social Security](#) [Online Settings](#)

**Welcome, John!** You last signed in on January 1, 2011 at 3:45 pm EST.

### Benefit Information

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[Last Benefit Payment:](#)    **\$1200.00** on April 3, 2011  
[Next Payment Date:](#)        **May 3, 2011**

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Payment Method:        Paper Check by Mail    [Enroll in Direct Deposit](#)

**Benefits You Receive:**

- [» Social Security Benefits](#)
- [» Medicare](#)

[Get a Benefit Verification Letter](#)    [Request a New Medicare Card](#)

### Personal Information

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**John Q. Public**  
Social Security Number: \*\*\* \*\* 6789  
Date of Birth: January 1, 1940

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### Contact Information

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Mailing Address:  
123 Sample Avenue  
Baltimore, MD 12345-1234

Phone Number:  
(123) 456-7890


[Update Contact Information](#)

### Help Center

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**How do I:**


- [? Get a new Social Security Card?](#)
- [? Change my name or birthdate?](#)
- [? Ask a question about my benefits?](#)



[Contact Us](#) | [Find an Office](#) | [FAQs](#)

**Benefit Verification - Customize Your Letter**  
(Screen 1 of iBEVE Application)

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# Social Security

My Social SecurityAccount Settings

## Get a Benefit Verification Letter

Form Approved: OMB No. 0000-0000  
Expires: 01/01/2015 | [Paperwork Reduction Act](#)

**What information would you like in your letter?**

[? Learn more about your benefit verification letter.](#)

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**Select one or more of the following options you would like to include in your letter:**

- Select All Options

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- Amount of benefit(s)
- Type of benefit(s) (disability, SSI, retirement, survivors, etc.)
- Medicare entitlement
- Date of birth

Get Your LetterCancel

**More Info**


### What is a Benefit Verification Letter?

If someone asks you to show proof of the benefits you receive from Social Security, you can get a "benefit verification" letter from us. The person asking may be a landlord, a social worker or someone from a bank or other business or agency who needs this information from you. You can also use the letter to show that you have Medicare or the date of birth we have for you on our records.

[Close](#)

**Benefit Verification - Your Letter**  
(Screen 2 of the iBEVE application)

John Q. Public | [Sign Out](#) Text Size Accessibility Help

 **Social Security**

[My Social Security](#) [Account Settings](#)

### Get a Benefit Verification Letter

#### Print Your Letter

After you have printed your letter, please remember to continue to the bottom of the page.

[Print your letter](#)

#### Save Your Letter

After you have saved your letter, please remember to continue to the bottom of the page.

[Save your letter](#)


[Adobe Reader](#) is required for saving your letter.

#### Mail Your Letter

I would like my letter mailed to the address displayed on this page. (It can take up to 10 days to receive your letter.)

[Mail your letter](#)

### Your Letter

**Social Security Administration**

Date: February 25, 2011  
Claim Number: XXX-XX-6789

**John Q. Public**  
1234 Sample Avenue  
Baltimore, MD 12345-1234

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

**Information About Current Social Security Benefits**

Beginning January 2010, the full monthly Social Security benefit before any deductions is \$ 1200.00.

Social Security benefits for a given month are paid the following month. (For example, Social Security benefits for March are paid in April.)

Your Social security benefits are paid on or about the third Wednesday of each month.

**Medicare Information**

You are entitled to hospital insurance under Medicare beginning January 2000.

You are entitled to medical insurance under Medicare beginning January 2000.

**If You Have Any Questions**

If you have any questions, you may call us at 1-800-772-1213, or call your local Social Security office at 866-931-9942. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY  
ROOM 200  
1010 PARK AVE  
BALTIMORE, MD 21201


If you do call or visit an office, please have this letter with you. It will help us answer your questions.

Regional Commissioner for Philadelphia

[Done](#)[Previous](#)

**Print Letter (Print Dialog Box)**

Printer

Name:  Printer ▼ Properties

Status: Idle Find Printer...

Type:

Where:  Print to file

Comment:  Manual duplex

Page range

All


Current page     Selection

Pages:

Type page numbers and/or page ranges separated by commas counting from the start of the document or the section. For example, type 1, 3, 5-12 or p1s1, p1s2, p1s3-p8s3

Copies

Number of copies:  ▲▼

  Collate

Print what:  ▼

Print:  ▼

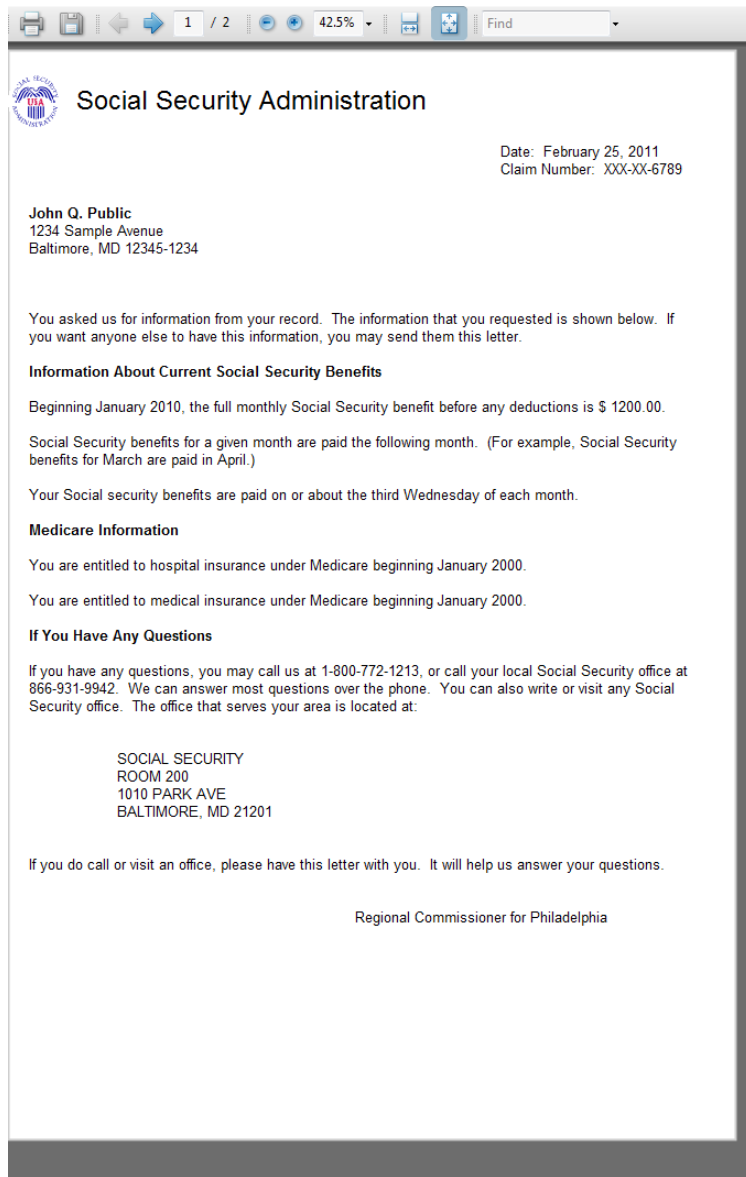
Zoom

Pages per sheet:  ▼


Scale to paper size:  ▼

Options... OK Cancel

**Save Letter (PDF)**



The image is a screenshot of a PDF viewer window. The window title bar shows standard navigation icons, a page indicator '1 / 2', a zoom level of '42.5%', and a search bar with the text 'Find'. The main content area displays a letter from the Social Security Administration. The letter includes the SSA logo, the recipient's name 'John Q. Public' and address, the date 'February 25, 2011', and a claim number 'XXX-XX-6789'. The letter text discusses the recipient's Social Security benefits, Medicare information, and provides contact details for the Baltimore office. The letter is signed by the Regional Commissioner for Philadelphia.

 **Social Security Administration**

Date: February 25, 2011  
Claim Number: XXX-XX-6789

**John Q. Public**  
1234 Sample Avenue  
Baltimore, MD 12345-1234

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Regional Commissioner for Philadelphia

**Benefit Verification - Mail Confirmation**  
(Screen 3 of iBEVE application)


John Q. Public | Sign Out Text Size Accessibility Help



# Social Security

[My Social Security](#) [Account Settings](#)

## Get a Benefit Verification Letter

 **Congratulations!**  
We have received your request for a Benefit Verification Letter on February 25, 2011. You should receive your letter by March 7, 2011.

**Print Your Letter**

After you have printed your letter, please remember to continue to the bottom of the page.

[Print your letter](#)

**Save Your Letter**


After you have saved your letter, please remember to continue to the bottom of the page.

[Save your letter](#)  
[Adobe Reader](#) is required for saving your letter.

**Mail Your Letter**

You have already made a request to mail your letter.

### Your Letter



## Social Security Administration

Date: February 25, 2011  
Claim Number: XXX-XX-6789

**John Q. Public**  
1234 Sample Avenue  
Baltimore, MD 12345-1234

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Regional Commissioner for Philadelphia

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