Screen Images and Interactions

Access Code Entry

Mobile Wage Reporting
OMB No. 0960-0715 Papenwork Reduction Act
Using This App
To use this app, you need the access code that came with your Mobile Wage Reporting packet.
If you do not have your access code or never received a Mobile Wage Reporting packet, please <u>contact us.</u>
Access Code:
Next
Read our Privacy Policy & Privacy Statement
Search our <mark>FAQs</mark>

Terms of Service

	-	Reporting of Service
Terms of Service		
l have rea above.	ad and agree to	o the Terms of Service
Admin provid	istration will ve	Social Security rify the information I formation in Social
		al Security may g this service if Social
I A	gree	I Do Not Agree

Full Terms of Service wording:

- I understand that this application contains U.S. Government information.
- I consent to the monitoring of my use of this application to ensure its appropriate use.
- I understand that it is a federal crime to:
 - Give false or misleading statements to obtain information in Social Security records; or
 Deceive the Social Security Administration of an individual's identity.
- I understand that unauthorized use of, or access to, this application may subject me to criminal or civil penalties, or both.
- I understand that if I am submitting wages for someone else, I must have his or her permission to do so.
- I understand that Social Security may stop me from using this service if it finds or suspects misuse.

Enter Pll

1st Appearance of Screen (Before Errors - Empty)

2nd / 3rd Appearance of Screen (After Errors - prepopulated)

Verify 🙃	Verify 🔒
Your Information	Your Information
First Name:	First Name: Mary
Last Name:	Last Name: Jones
(Other Last Name):	(Other Last Name):
Date of Birth:	Date of Birth: 04/01/1972
SSN:	SSN: 125-00-8472
Next	Next

Confirm PII

Standard Name Display	With Other Last Name Displayed
Confirm 🔒	Confirm 🔒
Your Information	Your Information
Name: Mary Jones	Name: Mary Jones (Smith)
Date of Birth: 04/01/1972	Date of Birth: 04/01/1972
Social Security Number: 125-00-8472	Social Security Number: 125-00-8472
Next	Next
Edit	Edit

Reporting Path Choice



Wage Entry for Self

Enter Wages	ô
Your wages for February 2012	
\$	
Next	

Confirm Wage Report for Self

Confirm Wage Report	î
Your wages for February 2012	
Wages: \$347.25	
	_
Submit	
Edit	
	_

SSN and Wage Entry for Other

1st Appearance of Screen (Before Errors - Empty)

2nd / 3rd Appearance of Screen (After Errors - prepopulated)

ô

Enter Wages 🔒 🔒	Enter Wages
Social Security number of the person you are reporting for	Social Security number of the person you are reporting for
SSN:	SSN: 967-00-3729
Their wages for February 2012	Their wages for February 2012
\$	\$ 218.46
Next	Next

Confirm Wage Report for Other



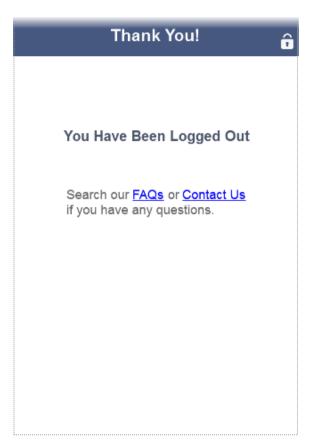
Interim Successful Submission

Submission Complete	î
Your wage submission was successful.	
You indicated that you have wages to report for someone else.	
Do you want to submit those wages?	
Yes No	

Final Successful Submission

Submission Complete 🔒 🔒			
Success!			
Thank you for your submission.			
We will mail a confirmation of the wages reported for February.			
March wages may be reported from April 1 to April 9.			
Log Out			
OR			
Submit More Wages			

Log Out Confirmation



Privacy Act Statement

	Supplemental Security Income bile Wage Reporting Application
Execu to coll inform	U.S.C. sections 205(a) and 1631(e), and tive Order 9397, as amended, authorize us ect this information. We will use the nation you provide to determine eligibility for emental Security Income.
Howe inform accura	hing us this information is voluntary. ver, failure to provide all or part of the lation could prevent us from making an ate and timely decision on Supplemental ity Income benefits.
	Return

Full Privacy Act Statement Wording:

Sections 205(a) and 1631 of the Social Security Act (42 U.S.C. §§ 405a, 1383), as amended, and Executive Order 9397, as amended, authorize us to collect information needed for wage reporting, including your Social Security number. We will use the information you provide us to determine eligibility for Supplemental Security Income.

Furnishing us this information is voluntary. However, failing to provide us with all or part of the information could prevent us from making an accurate and timely decision on Supplemental Security Income benefits.

We rarely use the information you supply for any purpose other than for making a determination relating to Supplemental Security Income benefits. However, we may use it for the administration and integrity of Social Security programs. We also may disclose information to another person or to another agency in accordance with approved routine uses, which include but are pot limited to the following:

- 1. To enable a third party or an agency to assist Social Security in establishing rights to Social Security benefits and/or coverage;
- 2. To comply with Federal laws requiring the release of information from Social Security records (e.g., to the Government Accountability Office and Department of Veterans' Affairs);
- 3. To make determinations for eligibility in similar health and income maintenance programs at the Federal, State, and local level; and,
- 4. To facilitate statistical research, audit, or investigative activities necessary to assure the integrity and improvement of Social Security programs (e.g., to the Bureau of the Census and private entities under contract to Social Security).

We may also use the information you provide in computer matching programs. Matching programs compare our records with records kept by other Federal, State, or local government agencies. We use information from these matching programs to establish or verify a person's eligibility for federally funded or administered benefit programs and for repayment of payments or delinquent debts under these programs.

A complete list of routine uses for this information is available in Systems of Records Notice entitled, Supplemental Security Incom See below for and information regarding our program revised Privacy Act www.socialsecurity.gov or at your/loc:Statement e.

Paperwork Reduction Act

	Supplemental Security Income Mobile Wage Reporting Application
o th n a n	his information collection meets the requirements f 44 U.S.C. §3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not eed to answer these questions unless we display valid Office of Management and Budget control umber. We estimate that it will take about 3 hinutes to read the instructions, gather the facts, and answer the questions.
	Return

Full Paperwork Reduction Act Wording:

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 control number. We estimate that it will take about 3 minutes to read the instructions, gather the facts, and answer the questions.

You may send comments on our time estimate above to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send <u>only</u> comments relating to our time estimate to this address, not the completed report.

The OMB control number for the Supplemental Security Income Telephone Wage Reporting System and the associated instructions package is 0960-0715; expiration date 07/31/2013.

Error Message Screens

Wage Reporting Period Closed



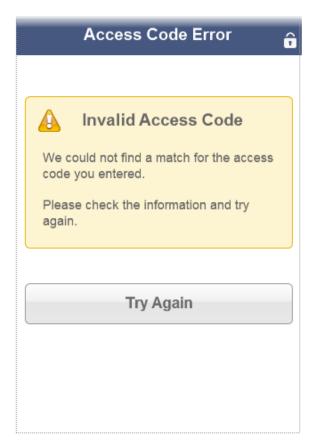
Service Unavailable

WISTRATIO	Service Unavailable
	Service Unavailable
	oologize, but this service is not ble at this time.
	service is available during the ing hours (Eastern Time):
Saturo Sunda	ay through Friday: 5:00 AM - 11:00 PM day: 5:00 AM - 11:00 PM ay: 8:00 AM - 10:00 PM ays: 5:00 AM - 11:00 PM

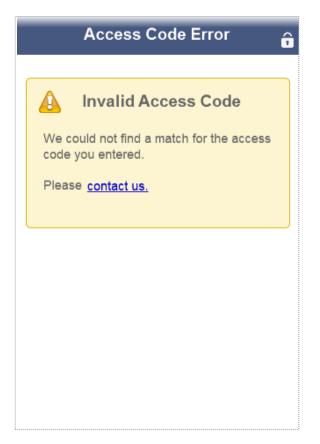
Cannot Connect

Cannot Connect We apologize, but the device you are using cannot connect with the application at this time. This may be because of an issue with the application or your Internet connection. Please check your Internet connection and try again. If your Internet connection is not the issue, please try again later, or call 1-866-772-0953 to report wages.	AL SHCOM	Cannot Connect
We apologize, but the device you are using cannot connect with the application at this time. This may be because of an issue with the application or your Internet connection. Please check your Internet connection and try again. If your Internet connection is not the issue, please try again later, or call		
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try again. If your Internet connection is not the issue, please try again later, or call		
please try again later, or call		-
	pleas	e try again later, or call

Access Code Error: 1st and 2nd Strikes



Access Code Error: 3rd Strike



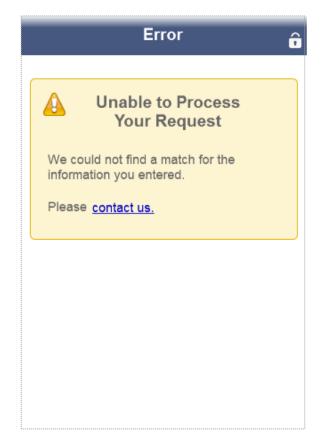
In-line Field Error (example)

Verify 🔒
Your Information
First Name: Mary
Last Name: Jones
(Other Last Name):
Date of Birth: 04/01/1972
SSN must be 9 characters
SSN:
Next

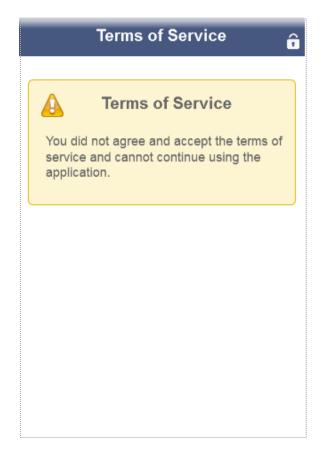
Verification/Exclusion Check Error: 1st and 2nd Strikes



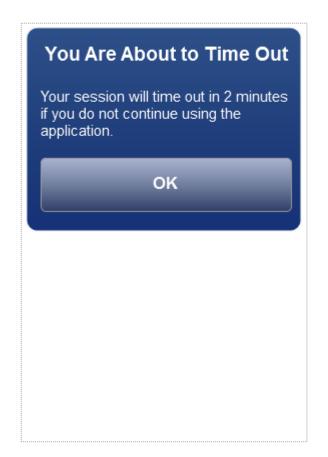
Verification/Exclusion Check Error: 3rd Strike



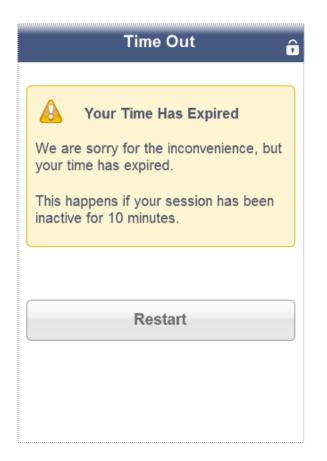
Terms of Service Refusal



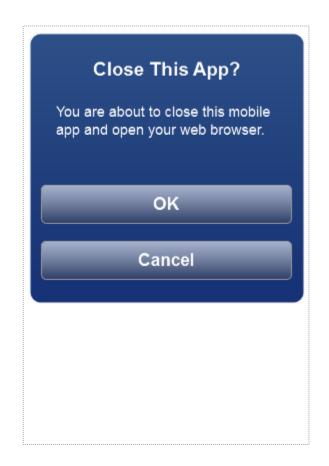
Time Out Warning



Time Out Error



Close This App Warning



Privacy Act Statement Collection and Use of Personal Information

Sections 205a and 1631 of the Social Security Act (42 U.S.C. §§ 405a, 1383), as amended, and Executive Order 9397, as amended, authorize us to collect this information, including your Social Security number. We will use the information you provide us to determine eligibility for Supplemental Security Income.

Furnishing us this information is voluntary. However, failing to provide us with all or part of the information could prevent us from making an accurate and timely decision on Supplemental Security Income benefits.

We rarely use the information you supply for any purpose other than for making a determination relating to Supplemental Security Income benefits. However, we may use it for the administration and integrity of Social Security programs. We may also disclose information to another person or to another agency in accordance with approved routine uses, which include but are not limited to the following:

- 1. To enable a third party or an agency to assist Social Security in establishing rights to Social Security benefits and/or coverage;
- 2. To comply with Federal laws requiring the release of information from Social Security records (e.g., to the Government Accountability Office and Department of Veterans' Affairs);
- 3. To make determinations for eligibility in similar health and income maintenance programs at the Federal, State, and local level; and,
- 4. To facilitate statistical research, audit, or investigative activities necessary to assure the integrity and improvement of Social Security programs (e.g., to the Bureau of the Census and private entities under contract with us).

We may also use the information you provide in computer matching programs. Matching programs compare our records with records kept by other Federal, State, or local government agencies. Information from these matching programs can be used to establish or verify a person's eligibility for federally-funded or administered benefit programs and for repayment of payments or delinquent debts under these programs.

A complete list of routine uses for this information is available in Systems of Records Notice entitled, Supplemental Security Income Record, 60-0103. This notice, additional information, and information regarding our programs and systems, are available on-line at <u>www.socialsecurity.gov</u> or at your local Social Security office.