



UNITED STATES OF AMERICA
RAILROAD RETIREMENT BOARD

CURRENT

<OFFICE NAME>
<OFFICE ADDRESS>
<CITY, STATE, ZIP CODE>
E-MAIL: <Office Email Address>

OFFICE HOURS: 9:00 AM TO 3:30 PM
MONDAY THROUGH FRIDAY EXCEPT FEDERAL HOLIDAYS

TOLL-FREE NUMBER: 1-877-772-5772
FACSIMILE NUMBER: FAX NUMBER

In reply refer to

Enclosed are the forms and other material you will need to apply for your annuity under the Railroad Retirement Act. The forms listed below in Group A have been designed so you can fill them out yourself. You must complete and return the forms marked by an "X" to the district office shown above. If you did not receive all the forms marked by an "X", contact the district office and they will send you the missing form.

The booklets and pamphlets listed in Group B contain information you will need to complete the form(s). You should keep the booklets and pamphlets you receive, even after you return your form(s). Contact the district office shown above if you have not received all the material marked by an "X".

GROUP A - FORMS TO BE COMPLETED AND RETURNED

- AA-17 Application for Widow(er)'s Annuity
- AA-17b Application for Determination of Widow(er) Disability
- AA-18 Application for Mother's/Father's and Child's Annuity
- AA-19 Application for Child's Annuity
- AA-19a Application for Determination of Child Disability
- AA-21 Application for Lump-Sum Death Payment and Annuities Unpaid at Death
- G-273a Funeral Director's Statement of Burial Charges
- AA-20 Application for Parent's Annuity
- AA-5 Application for Substitution of Payee
- G-478 Statement Regarding Patient's Capability to Manage Benefits
- G-208 Public Service Pension Questionnaire
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GROUP B - BOOKLETS AND PAMPHLETS YOU SHOULD KEEP

- G-77 How the Amount of Earnings Affect Payment of Survivor Annuities
- RB-3 Furnishing Evidence to Support Your Claim
- RB-5 Your Duties as Representative Payee - Representative Payee's Record
- RB-9s Events that Affect a Survivor Annuity
- RB-17 Survivor's Annuity
- RB-17b Widow(er)'s Disability Benefits
- RB-19a Child Disability Benefits
- RB-21 Lump-Sum Death Payment - Residual Lump-Sum - Annuities Unpaid at Death
- RB-23 Your Medicare Handbook
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GROUP C - EVIDENCE YOU MUST SUBMIT

The booklet, RB-3 Furnishing Evidence to Support Your Claim, explains the various types of documents that may be required and where you can locate them if you do not already have them. Please furnish evidence only for the items marked by an "X" below.

- Proof of Age
- Proof of Death
- Proof of Divorce
- Proof of Legal Appointment
- Proof of Marriage
- Proof of Military Service
- Proof of Payment of Burial Expenses
- Proof of Relationship
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If you have previously submitted any of these proofs to the Board, do not submit the proof again. Instead, explain on a separate sheet of paper why you are not submitting the proof at this time. If additional proof is needed, we will contact you.

Sincerely,