



UNITED STATES OF AMERICA  
**RAILROAD RETIREMENT BOARD**

<OFFICE NAME>  
<OFFICE ADDRESS>  
<CITY, STATE, ZIP CODE>  
<Office E-Mail 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: <Office Number>**

In reply refer to

This is concerning the overpayment described in earlier correspondence from our headquarters and your request for waiver consideration.

In order to complete action on your request, the Railroad Retirement Board requires the disclosure of financial information needed to determine your eligibility for a waiver. Therefore, you should complete the enclosed Financial Disclosure Statement (Form DR-423). In addition, you should submit a copy of your latest federal income tax return, if you have filed one in the past two years.

If you have any questions about the Financial Disclosure Statement, contact this office. Please return the completed form and copy of your latest income tax return within 30 days. A return envelope is enclosed for your convenience.

Sincerely,

Enclosures  
Financial Disclosure Statement (DR-423)  
Return Envelope