

305-14-1338

SOCIAL SECURITY ACCOUNT NUMBER

NORMA LOUISE ROBBINS

1927 E. 17th Street

WORKER'S NAME AND HOME ADDRESS

EMPLOYER'S NAME

Norma Louise Robbins

WORKER'S SIGNATURE

DETACH THIS PORTION from the upper half of the card and keep it in a safe place. If you lose the top half take this part to any Social Security Board Field Office and a duplicate card will be issued to you immediately. Unless you present this half of the card, you may have to wait several days for your duplicate.

Once each year you can secure a statement of wages recorded with the Social Security Board. A card upon which to make such request can be secured from any Social Security Board Field Office.

If your name is changed request an account number card bearing your new name on Form OAAN-7003 which any Social Security Board Field Office can furnish.

FEDERAL SECURITY AGENCY
SOCIAL SECURITY BOARD

