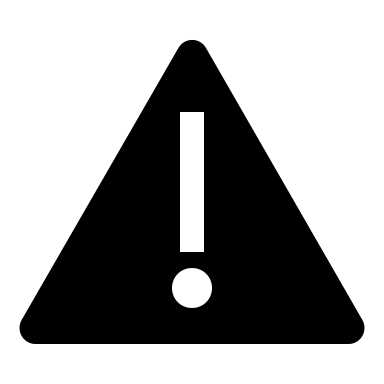
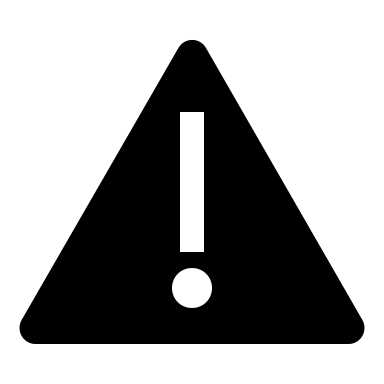
**NEXT STEPS**

**IMPORTANT NOTICE:**

**Report changes by the 10th day of the month after it happened. Failure to do so could result in an overpayment (which likely would be required to be repaid). If you aren’t sure if a change**

**is important, contact your local office anyway.**

**Call Monday – Friday, 8 a.m. – 7 p.m. +1 800-772-1213**

**TTY** [**+1 800-325-0778**](tel:+1-800-325-0778)**if you’re deaf or heard of hearing.**

**IF THIS CHANGE OCCURRED IN THE PAST, YOU MAY HAVE RECEIVED MORE BENEFITS THAN ALLOWED AND MAY WISH TO SPEAK WITH A REPRESENTATIVE OR LEGAL COUNSEL.**

Print two copies of this letter, and keep one in a safe place for yourself, along with proof of mailing (or who you spoke with if delivering in person or calling).

You can mail, fax, or deliver the letter below in person, to your local Social Security office.

**Deliver your letter in person**

* Call Social Security at 1-800-772-1213 and make an appointment to take the letter into the office. Take the letter to your social security office at **{{ssa\_office.address.on\_one\_line()}}**.
* Try to go early in the day.
* You may have to wait to talk to someone.
* When you give them the letter, ask them for a copy with a stamp of the date on it. Keep your copy in a safe place.

**Send your letter by “certified mail”**

Print two copies of this letter, and keep one in a safe place for yourself, along with proof of mailing.

At the Post Office, ask to send your letter by certified mail. They will give you a receipt.  Put the receipt with the copy of the letter you are keeping for yourself. Send the letter to **{{ssa\_office.address.on\_one\_line()}}**.

**Fax your letter**

You may be able to fax your letter to local SSA office. Call your local SSA office to find out. Keep the paper receipt that shows the fax went through.

{%p if defined('ssa\_office.phone\_number') %}

You can call your local offfice at **{{ phone\_number\_formatted(ssa\_office.phone\_number) }}**, or the toll-free number above.

{%p endif %}

{{client.address\_block()}}

{{letter\_date}}

{{ssa\_office.address\_block()}}

Re: {{client}}

Social Security Number: {{client.ssn}}

**Report of Change in {{ change\_type }}**

To the Social Security Administration:

I am writing to report a change in my {{change\_type}}.

{%p for job in employer\_jobs %}

On about {{job.start\_date}}, I started working at {{job.employer}} at {{job.employer\_address}}. I work {{job.normalized\_hours(12) }} hours every month and get paid {% if job.is\_hourly %} {{currency(job.hourly\_rate)}} per hour {%else %} {{currency(job.amount(period\_to\_use=12)) }} {% endif %}. {% if job.have\_pay\_stubs %} Copies of my pay stubs are attached.{% endif %}

{%p endfor %}

{%p for job in self\_jobs %}

In {{ job.start\_date }} , I started working for myself doing {{ job.self\_employment\_type }}.  I work {{job.normalized\_hours(12) }} hours every month. My business earns about {{ currency(job.amount(period\_to\_use=12)) }} every month. It costs me {{ currency(job.deductions) }} in expenses to run my business.

{%p endfor %}

{%p if benefits\_type == 'ssi' and changes.true\_values().number() > 0 %}

I {{'also' if working or working\_for\_self else ''}} need to report to Social Security that:

* {%p for change in changes.true\_values()%}
* {%p if change == "I moved" %}
* I moved on {{ change\_details[change].date}}. My new address is {{client.address.on\_one\_line()}}
* {%p elif change =="The number of people in my household changed" %}
* My household changed on {{ change\_details[change].date }}. {{ change\_details['The number of people in my household changed'].reasons.true\_values()}}.
* {%p else %}
* {{ change }} on {{change\_details[change].date }}.
* {%p endif %}
* {%p endfor %}

{%p endif %}

{{showifdef('other\_changes')}}

{{ showifdef('changes\_details') }}

Please contact me if you have any questions.

Sincerely,

{{ showifdef('client.signature') }}

{{client}}

{{showifdef('client.phone\_number')}}

{{showifdef('client.email')}}