

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

BUREAU OF OLD-AGE AND
SURVIVORS INSURANCE

IN REPLYING, ADDRESS:
SOCIAL SECURITY ADMINISTRATION
DISTRICT OFFICE

2801 De La Vina Street
Santa Barbara, California
May 9, 1962

•
Mr. Arthur Beal
Cambria Pines
Cambria, California

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TELEPHONE WO 5-8528

Dear Mr. Beal:

RE: 552-07-7350

In connection with your claim for Social Security benefits,
we need the additional information listed below.

After you have filled in the item(s) and signed your name, please
return this letter to us.

Sincerely yours,

Glenn A. Franklin
District Manager

Enclosure

By Leslie Bohrer
Claims Representative

Have you sent for a census record? _____ If "yes", please forward to
us as soon as received. We will return it to you.
yes or no

Knowing that anyone who makes a false statement or misrepresents in connection with Federal
old-age, survivors, and disability insurance benefits is committing a crime punishable under
Federal law, I certify that the above statements are true.

(Date signed)

(Please sign here)