SET YOUR HOUSE IN ORDER

SOCIAL SECURITY

		Name:		
Date:				
			Location of Social Security Card:	
Nearest Social Security Office Addre	ess:			
City:	State:	Zip:	Phone:	
My (our) Social Security benefits ar	e as follows			
Monthly Social Security Payments:				
Medicare Hospitalization (Part A):				
Medicare Medical (Part B):				
Supplimental Plans				

The easiest way to obtain facts about your Social Security benefits is to log on to www.socialsecurity.gov. By clicking on the icon for *My Social Security* you can create an account and log into your personal social security records. You can even file for your Social Security benefits once you have created your personal account. You may also call Social Security toll-free at (800) 772-1213.

FILING FOR SOCIAL SECURITY BENEFITS UPON DEATH OF A SPOUSE

To receive Social Security benefits, go in person to the Social Security office as soon as possible after the death of yor spouse. A delay may void some benefits. When you go, take your spouse's Social Security card and death certificate. Also take your birth certificate, marriage certificate and the birth certificates for each child.

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Date:				
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Monthly Social Security Payments	:			
Medicare Hospitalization (Part A):				
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