

SOCIAL SECURITY ADMINISTRATION

Application for a Social Security Card

EXHIBIT 6

Form Approved
OMB No. 0960-0066

1	NAME → <small>TO BE SHOWN ON CARD</small>	First	Full Middle Name	Last			
	FULL NAME AT BIRTH IF OTHER THAN ABOVE	First	Full Middle Name	Last			
	OTHER NAMES USED						
2	MAILING ADDRESS → <small>Do Not Abbreviate</small>	Street Address, Apt. No., PO Box, Rural Route No.					
		City	State	Zip Code			
3	CITIZENSHIP → <small>(Check One)</small>	<input type="checkbox"/> U.S. Citizen	<input type="checkbox"/> Legal Alien Allowed To Work	<input type="checkbox"/> Legal Alien Not Allowed To Work (See Instructions On Page 1)	<input type="checkbox"/> Other (See Instructions On Page 1)		
4	SEX →	<input type="checkbox"/> Male	<input type="checkbox"/> Female				
5	RACE/ETHNIC DESCRIPTION → <small>(Check One Only - Voluntary)</small>	<input type="checkbox"/> Asian, Asian-American or Pacific Islander	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Black (Not Hispanic)	<input type="checkbox"/> North American Indian or Alaskan Native	<input type="checkbox"/> White (Not Hispanic)	
6	DATE OF BIRTH → <small>Month, Day, Year</small>	7	PLACE OF BIRTH → <small>(Do Not Abbreviate)</small>	City	State or Foreign Country	<small>Office Use Only</small>	
				FCI			
8	A. MOTHER'S MAIDEN NAME →	First	Full Middle Name	Last Name At Her Birth			
	B. MOTHER'S SOCIAL SECURITY NUMBER →	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
9	A. FATHER'S NAME →	First	Full Middle Name	Last			
	B. FATHER'S SOCIAL SECURITY NUMBER →	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
10	Has the applicant or anyone acting on his/her behalf ever filed for or received a Social Security number card before? <input type="checkbox"/> Yes (If "yes", answer questions 11-13.) <input type="checkbox"/> No (If "no", go on to question 14.) <input type="checkbox"/> Don't Know (If "don't know", go on to question 14.)						
11	Enter the Social Security number previously assigned to the person listed in item 1. →	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
12	Enter the name shown on the most recent Social Security card issued for the person listed in item 1. →	First	Middle Name	Last			
13	Enter any different date of birth if used on an earlier application for a card. →	_____ Month, Day, Year					
14	TODAY'S DATE → <small>Month, Day, Year</small>	15	DAYTIME PHONE NUMBER (____) _____ <small>Area Code Number</small>				
16	I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best of my knowledge.						
	YOUR SIGNATURE →	17 YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: <input type="checkbox"/> Self <input type="checkbox"/> Natural Or Adoptive Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other (Specify) _____					
DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY)							
NPN		DOC		NTI		ITV	
PBC	EVI	EVA	EVC	PRA	NWR	DNR	UNIT
EVIDENCE SUBMITTED				SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW			
				DATE			
				DATE			



SOCIAL SECURITY

March 18, 1999

Mr. Scott McDonald
789 Meal Drive
Gurley, Alabama 35748

Dear Mr. McDonald:

This is in response to your letter to the Commissioner concerning Social Security numbers for children.

The Social Security Act does not require a person to have a Social Security number (SSN) to live and work in the United States, nor does it require an SSN simply for the purpose of having one. However, if someone works without an SSN, we cannot properly credit the earnings for the work performed.

Other laws require people to have and use SSN's for specific Purposes. For example, the Internal Revenue Code (26 U.S.C. 6109 (a) and applicable regulations (26 CFR 301.6109-1 (d)) require an individual to get and use an SSN on tax documents and to furnish the number to any other person or institution (such as an employer or a bank) that is required to provide the Internal Revenue Service (IRS) information about payments to the individual. There are penalties for failure to do so. The IRS also requires employers to report SSN's with employees' earnings. In addition, people filing tax returns for taxable years after December 31, 1994, generally must include the SSN of each dependent.

The privacy Act regulates the use of SSN's by government agencies. They may require an SSN only if a law or regulation either orders or authorize them to do so. Agencies are required to disclose the authorizing law or regulation. If the request has no legal basis, the person may refuse to provide the number and still receive the agency's services. However, the law does not apply to private sector organizations. Such an organization can refuse its services to anyone who does not provide the number on request.

We hope you find this information helpful. If you have further questions, you may call our toll-free number, 1-800-772-1213. Our representatives will be glad to help you.

Sincerely,

Charles H. Mullen
Associate Commissioner
Office of Public Inquiries

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