



Authorization for the Social Security Administration to Release My Social Security Earnings Record Information

Name

Social Security Number

Date of Birth

I authorize the Social Security Administration (SSA) to release information or records about me to Darlene Oldendick, Kathy Pelzel or Nicole Strong of Social Security Advice Online, LLC, an independent consulting company, and understand that SSA will be disclosing my full record from the query printout circled: DEQY, eWorks, or ICERS.

I want this information released, because I have contacted Social Security Advice Online, LLC to assist me with my Social Security issues.

Below is an explanation of the information that will be disclosed on the query circled above.

DEQY Query – contains your name, Social Security number, date of birth, employer names, employer address and yearly earnings for the year requested.

ICERS Query – contains your name, Social Security number, date of birth, sex, years of coverage, filing date, disability onset date, prior filing information, insured status, computational yearly earnings, computation data, dividend, base years, start date, trial computations, and primary insurance amounts.

eWorks Query – contains your name, date of birth, Social Security number, trial work period, extended period of eligibility, or expedited reinstatement information, total earnings for years worked, countable earnings, self-employment income hours worked, employer monthly breakdown report, development for IRWEs, subsidy, unsuccessful work attempts, SGA Decision, and payment information.

This consent is valid for one year from the date signed unless otherwise indicated by the individual named above. I am the individual to whom the information/record applies or that person's parent (if a minor) or legal guardian. I know that if I make any representation which I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

Signature _____ Date Signed _____

Relationship (if not the individual): _____ Daytime Phone No: _____