

**SOCIAL SECURITY DISABILITY, UNEMPLOYMENT,
and VETERAN'S ADMINISTRATION INFORMATION SHEET**

1. Name: _____

2. Are you currently receiving any type of Social Security Benefits (Disability, Retirement, etc)? Yes No

If Yes:

What type of benefits are you receiving? (circle one): Disability Retirement Widows

When did you begin receiving these Social Security Benefits? _____

What is the amount of your benefit? \$ _____ /month

3. Do you have children under the age of 18, or over 18 and still in High School? Yes No

If Yes: Please list their names and birth dates.

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Name: _____ Birth Date: _____

Are you receiving Social Security Benefits for your children? Yes No

If Yes, what is the amount of this benefit? \$ _____ /month

4. If you are **NOT** receiving Social Security **Disability** Benefits, have you applied for Social Security Disability Benefits? Yes No

If Yes: When did you apply? _____

What stage is your claim at? (Please circle one)

Initial Application Reconsideration Hearing

5. Do you, or did you, have an attorney or representative handling your Social Security Claim? Yes No

If Yes: who is/was the attorney or representative handling the claim?

Name: _____

Firm: _____

Address: _____

Phone: _____

6. If you have **NOT** applied for Social Security Benefits, **you should apply**. Please call our firm to discuss this further.

7. Have you ever applied for Unemployment for Veteran's Administration Benefits? Yes No

8. Did you ever receive Unemployment or Veteran's Administration Benefits? Yes No

***IMPORTANT: If you are receiving Social Security Disability, Unemployment, or Veteran's Administration Benefits, please send us all paperwork concerned with these benefits. This would include: Approval Letter, any Denial Letters, the Decision Letter, and the Notice of Award Letter**