## MARCI A. GILBERT **Cooke County District Clerk**

101 S. Dixon St., Room 207 Gainesville, Texas 76240 940-668-5450

## Redaction of SSN Request Form

Redaction of Social Security Number as authorized by the Government Code Sec. 552.147(d) (see below) will remove the first 5 digits of the requestor's Social Security Number, leaving the last 4 digits of the Social Security Number visible in the document on file. You must complete the form for each cause number, listing the title of the specific document(s) and page number(s) where the social security number to be redacted appears. You must also present your driver's license or state issued identification card.

Note: You may only request your own social security number redacted or that of your child/ward. Only a parent/legal guardian may request the redaction of a child's SSN on a document.

## IF THIS FORM IS NOT COMPLETED IN FULL AND LEGIBLY THE REQUEST WILL BE CONSIDERED VOID AND WILL NOT BE FULFILLED.

Cause No.

Full name of person whose SSN is to be redacted:

Document Title

Page No.

I am the person or parent/legal guardian of the persons who's Social Security Number (SSN) appears in the document(s) listed above. I submit this request for the purpose of preventing full disclosure of my SSN and I understand the last four digits must remain in the public document as required by law.

Signature of Requestor

Date

Daytime Phone Number

\*\* If this form is mailed to the District Clerk's office, you must include a photocopy of requestor's driver's license or state issued identification card. The photocopy will be destroyed after verification.

Government Code §552.147(d): Unless another law requires a social security number to be maintained in a government document, on written request from an individual or the individual's representative the clerk shall redact within a reasonable amount of time all but the last four digits of the individual's social security number from information maintained in the clerk's official public records, including electronically stored information maintained by or under the control of the clerk. The individual or the individual's representative must identify, using a form provided by the clerk, the specific document or documents from which the partial social security number shall be redacted.

TO BE COMPLETED BY CLERK:			
Redacted from:	Clerk's Initials	Date Completed	
Original:			*Type of ID Presented: _
Image:			Destroyed on:
Microfilm:			By:

Request Not Completed due to: Clerk's Initials: