Request to Redact Social Security Number
From Public Documents
County Clerk   District Clerk

I request that the first five numbers of my social security number found in the following document(s) be removed from public access:

Name listed on Document	Document Title	Volume/Page of Case Number	Page # that SSN appears

I am the owner of the Social Security (SSN) that appears in the document(s) listed above.

I submit this request along with proof of my identification for the purpose of preventing full disclosure of my SSN, and I understand that the last four digits must remain in the public documents as required by law.

_____   _____
Printed Full Name   Daytime Phone Number

_____   _____
Signature   Date

_____   _____
Address   City/State/Zip