



REQUEST TO REDACT SOCIAL SECURITY NUMBER FROM PUBLIC DOCUMENTS

(One form per person per document)

I request that my social security number found in the following document be removed from public access:

<u>NAME LISTED ON DOCUMENT</u>	<u>DOCUMENT TITLE</u>	<u>RECORDING NUMBER</u>	<u>PAGE # THAT SSN APPEARS</u>
_____	_____	_____	_____

I am the owner of the Social Security Number (SSN) that appears in the document (s) listed above. I submit this request for the purpose of preventing full disclosure of my SSN and I understand that the last four digits must remain in the public document as required by law.

SIGNATURE

DATE

DAYTIME PHONE NUMBER

ADDRESS

CITY

STATE

ZIP CODE

FOR OFFICE USE

DATE REQUEST RECEIVED: _____

DATE REDACTION COMPLETED: _____

REDACTED FROM IMAGES

REDACTED FROM BOOK (if applicable)

COMMENTS: _____

REDACTION COMPLETED BY (NAME OF STAFF): _____ **HAYS COUNTY CLERK'S OFFICE**