



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 (s) 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