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# Social Security Administration Retirement, Survivors, and Disability Insurance

Important Information

Office of Central  
Operations  
P.O. Box 32913  
Baltimore, Maryland 21241-2913  
Date: December 27, 2015  
Claim Number: 587-59-1197 SA



0001961 CTPML7 1A 0.440  
GREGORY D KEENUM  
ATTORNEY AT LAW  
ANGELIA M MOORE  
219 WEST COLLEGE ST  
BOONESVILLE MS 38829-3411



Dear Mr. Keenum:

We are withholding the amount of \$1,064.00, which represents the balance of 25 percent of the past-due benefits for Angelia M Moore, in anticipation of direct payment of an authorized attorney's fee. We previously paid you \$1,269.96 (\$1,355.00 minus \$85.37 user fee) August 10, 2015 and \$8,639.37 (\$8,645.00 minus \$5.63 user fee) October 14, 2015 which totals \$10,000.00 under section 206(A) of the Social Security Act, as amended, for your services before the administration. We are writing at this time to determine whether you have petitioned the United States District Court for the Northern District of Mississippi for a fee for your services before the court.

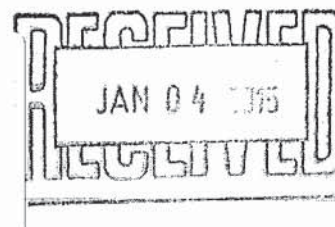
Please write to: Social Security Administration, Office of Central Operations, Office of Disability Operations, Special Appeals & Examining Section 1, P.O. Box 32913, Baltimore MD 21241-2913 or send a fax (410) 966-0769 to let us know whether you have or will petition for a fee.

If you have been authorized to receive a fee in this case, please send us a copy of that authorization. If you do not intend to petition for a fee for your services, your written statement expressly waiving a fee is necessary before we can release the withheld benefits to the claimant.

Sincerely,

*Social Security Administration*

EXHIBIT 1



5001961 \* 010101515DN001373 \* CTPA/P.ML701515DN.R151222.F1A

8106-275-9405  
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Social Security Administration  
Retirement, Survivors, and Disability Insurance  
Notice of Award

Office of Central  
Operations  
1500 Woodlawn Drive  
Baltimore, Maryland 21241-1500  
Date: May 24, 2015  
Claim Number: 587-59-1197 HA

ANGELA MARIE MOORE  
201 MAGNOLIA DR  
BOONEVILLE MS 38829



We are writing to let you know that you are entitled to monthly disability benefits from Social Security beginning April 2011.

**Your Benefits**

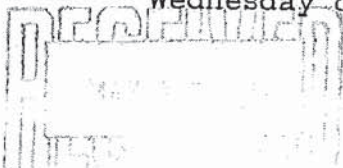
The following chart shows your benefit amount(s) before any deductions or rounding. The amount you actually receive may differ from your full benefit amount. When we figure how much to pay you, we must deduct certain amounts, such as Medicare premiums and worker's compensation offset. We must also round down to the nearest dollar.

Beginning Date	Benefit Amount	Reason
April 2011	\$ 773.20	Entitlement began
December 2011	\$ 801.00	Cost of living adjustment
December 2012	\$ 814.60	Cost of living adjustment
December 2013	\$ 826.80	Cost of living adjustment
December 2014	\$ 840.80	Cost of living adjustment

**What We Will Pay**

- Your first check is for \$29,862.00.
- This is the money you are due through April 2015.
- Your next scheduled payment of \$735.00 which is for May 2015, will be received on or about the third Wednesday of June 2015.
- After that, you will receive \$735.00 on or about the third Wednesday of each month.

SEE NEXT PAGE



1001444 0402NTESM001736 CT PAF P M F N T E S M R J S I S 19 F I A



Your past due benefit period is 04/2011 through 03/2015 at \$38,836.00. We must withhold 25% of this past due benefit amount (\$9,709.00) from any future payments. We must also withhold any Supplemental Security Income (SSI) that you received, but we determined that you did not receive any during this period. After calculating all benefits both paid and due, we determined that you were due \$29,862.00.

- The day of the month you receive your payments depends on your date of birth.

### The Date You Became Disabled

We found that you became disabled under our rules on October 27, 2010.

You have to be disabled for 5 full calendar months in a row before you can be entitled to benefits. Your first month of entitlement is April 2011.

### Information About Lawyer's Fees

When a representative wants to charge for helping with a Social Security claim, we must approve the fee. We usually withhold 25 percent of past-due benefits in order to pay the approved representative's fee. We withheld \$9,709.00 from your past-due benefits in case we need to pay your representative.

When we decide the amount of the fee, we will let you and the representative know how much of this money will be used to pay the fee. We will send any remainder to you.

Section 206(B) of the Social Security Act, as amended, governs fees for services before the court. If your lawyer wishes to receive a fee for those services, he/she must send the petition for that fee to the U.S. District Court for the Northern District of Mississippi, with a copy to the United States Attorney's Office. He should also send a copy to the Social Security Administration at:

SSA, ODO, DD01, SAES  
PO Box 32913  
Baltimore, MD, 21241

Your lawyer may also petition for a fee under the Equal Access Justice Act (EAJA). These awards are paid from administrative funds, and unlike fees under Section 206 of the Act, are not deducted from your past due benefits. The EAJA specifically provides that where an attorney receives fees for the same work under both Section 206(B) of the Social Security Act and the EAJA, the attorney must refund to you the amount of the smaller fee.

If your lawyer is not going to file a fee petition with the

SEE NEXT PAGE

court, he should notify us in writing so that we can send you and your family any funds we withheld from your past due benefits.

You are entitled to benefits because of a decision made by the Administrative Law Judge.

If you disagree with this decision, you have the right to appeal. We will review your case and consider any new facts you have. A person who did not make the first decision will decide your case. We will correct any mistakes. We will review those parts of the decision, which you believe are wrong and will look at any new facts you have. We may also review those parts, which you believe are correct and may make them unfavorable or less favorable to you.

- You have 60 days to ask for an appeal.
- The 60 days start the day after you get this letter. We assume you got this letter 5 days after the date on it unless you show us that you did not get it within the 5-day period.
- You will have to have a good reason for waiting more than 60 days to ask for an appeal.
- You have to ask for an appeal in writing. We will ask you to sign a form SSA-561-U2, called "Request for Reconsideration." Contact one of our offices if you want help.

### Information About Medicare

You are entitled to hospital insurance under Medicare beginning April 2013.

You are entitled to medical insurance under Medicare beginning May 2015.

We did not give you earlier medical insurance because we did not process it timely. If you want to have these benefits earlier, you can choose medical insurance benefits beginning April 2013. If you want this benefit to start earlier, you must do the following things within 60 days after the date of this notice:

- tell us in writing that you want the medical insurance benefits beginning April 2013;
- pay us \$2,622.50 (this covers the premiums due from April 2013 through April 2015); or,
- tell us we can withhold this amount from the check.

SEE NEXT PAGE



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If you want the benefits beginning April 2013 but find it hard to pay the premium amount in a lump sum, ask us about other ways to pay the money.

We charge a monthly premium for your medical insurance. The rates are shown below:

Beginning Date	Amount
April 2015	\$ 104.90

We are taking medical insurance premiums due through May 2015 out of the check you will receive around May 23, 2015. These premiums total \$209.80. We will deduct medical insurance premiums 1 month in advance.

We are deducting past-due premiums from your check.

### Medicare Prescription Drug Plan Enrollment

Now that you are eligible for Medicare, you can enroll in a Medicare prescription drug plan (Part D).

To learn more about the Medicare prescription drug plans and when you can enroll, visit [www.medicare.gov](http://www.medicare.gov) or call 1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048). Medicare also can tell you about agencies in your area that can help you choose your prescription drug coverage.

If you have limited income and resources, we encourage you to apply for the extra help that is available to assist with Medicare prescription drug costs. The extra help can pay the monthly premiums, annual deductibles and prescription co-payments. To learn more or apply, please visit [www.socialsecurity.gov](http://www.socialsecurity.gov), call 1-800-772-1213 (TTY 1-800-325-0778) or visit the nearest Social Security office.

### Other Social Security Benefits

This benefit is the only benefit you can receive from us at this time. In the future, if you think you might qualify for another benefit from us, you will need to apply again.

### Your Responsibilities

The decisions we made on your claim are based on information you gave us. If this information changes, it could affect your benefits. For this reason, it is important that you report changes to us right away. We have enclosed a pamphlet, "What You Need To Know When You Get Social Security Disability Benefits". It will tell you what must be reported and how to report. Be sure to read the parts of the pamphlet which explain what to do if you go to work or if your health

improves.

### Things To Remember

The doctors and other trained personnel who decided that you are disabled expect your health to improve. Therefore, we will review your case in April 2017. We will send you a letter before we start the review. Based on that review, your benefits will continue if you are still disabled, but will end if you are no longer disabled.

### Do You Think We Are Wrong?

If you do not agree with this decision, you have the right to appeal. We will review your case and look at any new facts you have. A person who did not make the first decision will decide your case. We will review the parts of the decision that you think are wrong and correct any mistakes. We may also review the parts of our decision that you think are right. We will make a decision that may or may not be in your favor.

- You have 60 days to ask for an appeal.
- The 60 days start the day after you receive this letter. We assume you received this letter 5 days after the date on it unless you show us that you did not receive it within the 5-day period.
- You must have a good reason if you wait more than 60 days to ask for an appeal.
- You can file an appeal with any Social Security office. You must ask for an appeal in writing. Please use our "Request for Reconsideration" form, SSA-561-U2. You may go to our website at [www.socialsecurity.gov/online/](http://www.socialsecurity.gov/online/) to find the form. You can also call, write, or visit us to request the form. If you need help to fill out the form, we can help you by phone or in person.

### If You Want Help With Your Appeal

You can have a friend, representative, or someone else help you. There are groups that can help you find a representative or give you free legal services if you qualify. There also are representatives who do not charge unless you win your appeal. Your local Social Security office has a list of groups that can help you with your appeal.

If you get someone to help you, you should let us know. If you hire someone, we must approve the fee before he or she can collect it. And if you hire a representative who is eligible for direct pay, we will withhold up to 25 percent of any past due benefits to pay toward the fee.

SEE NEXT PAGE





**Suspect Social Security Fraud?**

Please visit <http://oig.ssa.gov/r> or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

**If You Have Questions**

We invite you to visit our website at [www.socialsecurity.gov](http://www.socialsecurity.gov) on the Internet to find general information about Social Security. If you have any specific questions, you may call us toll-free at 1-800-772-1213, or call your local Social Security office at 1-866-504-4267. We can answer most questions over the phone. If you are deaf or hard of hearing, you may call our TTY number, 1-800-325-0778. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY  
199 SADDLE CREEK DRIVE  
TUPELO, MS 38801

If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly when you arrive at the office.

*Social Security Administration*

Enclosure(s):  
SSA Pub No 05-10153