

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF TEXAS

vs

COMMISSIONER, SOCIAL SECURITY
ADMINISTRATION

CIVIL ACTION NO. _____

COMPLAINT

The above-named Plaintiff makes the following representations to this Court for the purpose of obtaining judicial review of a decision of the Defendant rendered on _____ (date) adverse to the Plaintiff:

1. The Plaintiff, who Social Security Account Number (last four digits only) is _____, is a resident of _____ (city), and _____ (state).
2. The Plaintiff complains of a decision which adversely affects the Plaintiff in whole or in part. The decision has become the final decision of the Commissioner for purposes of judicial review and bears the following caption:

In the case of

Claim for

(Claimant)

(Wager Earner)

(Social Security Number - last four digits only)

3. The Plaintiff has exhausted administrative remedies in this matter and this Court has jurisdiction for judicial review pursuant to 42 U.S.C. 495(g).
4. The Plaintiff shall effect proper service of process by serving a copy of the summons and complaint upon the local United States Attorney, the Attorney General of the United States, and the Secretary of Health and Human Services within 120 days from the date of filing this complaint according to Rules 4(j) and 4(m) of the Federal Rules of Civil Procedure and Local Court Rule CV-4.

Wherefore Plaintiff seeks judicial review by this Court and the entry of a judgment for such relief as may be proper, including costs.

Plaintiff or Attorney for Plaintiff

Address

City, State, Zip

Telephone Number