

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF KENTUCKY**

\_\_\_\_\_  
Plaintiff,  
(If a minor child, only use Plaintiff's initials and  
indicate the adult's name filing on child's behalf)

v. CASE NO. \_\_\_\_\_  
(To be supplied by the Clerk)

\_\_\_\_\_  
COMMISSIONER,  
SOCIAL SECURITY ADMINISTRATION  
Defendant,

**COMPLAINT FOR JUDICIAL REVIEW OF A DECISION  
OF THE COMMISSIONER OF SOCIAL SECURITY**

1. Plaintiff currently resides at \_\_\_\_\_,  
street address  
\_\_\_\_\_, \_\_\_\_\_,  
city county  
\_\_\_\_\_, \_\_\_\_\_,  
state zip code telephone number

2. Plaintiff has a Social Security number ending in the last four digits \*\*\*-\*\*-\_\_\_\_.

3. Plaintiff complains of a decision which adversely affects him/her 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 (If a minor child, only use  
initials and indicate the adult's name  
filing on child's behalf)

\_\_\_\_\_  
Type of Benefit(s)

\_\_\_\_\_  
\*\*\*-\*\*-\_\_\_\_

\_\_\_\_\_  
Wage earner

\_\_\_\_\_  
Last four digits of Social Security No.

4. The final decision of the Commissioner was erroneous, not supported by substantial evidence in the record, and/or contrary to the law.
5. Plaintiff received notice of the Appeals Council decision on \_\_\_\_\_.  
date
6. Plaintiff has exhausted all administrative remedies in this matter, and this Court has jurisdiction for judicial review pursuant to 42 U.S.C. § 405(g).

WHEREFORE, Plaintiff requests that the final decision of the Commissioner be modified or reversed, with or without remand.

I, the undersigned, declare (or certify, verify, or state) under penalty of perjury that the information contained in this document is true and correct.

This \_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Plaintiff (If a minor child,  
signature of adult filing on child's behalf)