

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MISSOURI
_____ DIVISION

Plaintiff,

v.

Case No.

(to be assigned by Clerk of District Court)

CAROLYN COLVIN,
Acting Commissioner, Social Security Administration,

Defendant.

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

NOTICE:

In order for your complaint to be filed, it must be accompanied by a "Social Security Identification Form" that is accessible from the United States District Court Eastern District of Missouri's website under "Court Business" and "Forms."

The complaint must also include a copy of the Appeal Council's Letter denying request for review. This document is required to show that plaintiff has exhausted all administrative remedies before seeking review in this Court.

Except as explicitly noted in this form, plaintiff should not include exhibits or evidence, nor may it include an argument.

Plaintiff, _____, resides at

_____, _____, _____
street address city county

_____, _____, _____
state zip code telephone number

Plaintiff respectfully alleges:

1. This is an action seeking court review of the decision of the Commissioner of Social Security pursuant to section 205(g) and/or section 1631(c)(3) of the Social Security Act, 42 U.S.C. § 405(g) and/or 1383(c)(3).

2. Plaintiff became entitled to receive disability insurance benefits and/or Supplemental Security Income benefits because of the following disability:

3. The disability began on this date:

4. The Social Security Administration disallowed plaintiff's application for disability insurance benefits and/or Supplemental Security Income benefits.

5. Subsequently, plaintiff requested a hearing, and on _____ [date of hearing], a hearing was held, and the Administrative Law Judge denied plaintiff's claim on _____ [date of ALJ decision].

6. Thereafter, plaintiff requested a review by the Appeals Council, and after its consideration, on _____ [date of Appeals Council letter], the Appeals Council denied the request for review, making the Administrative Law Judge's decision the "final decision" of the Commissioner, subject to judicial review pursuant to 42 U.S.C. § 405(g) and/or 1383(c)(3). Plaintiff received this letter on _____ [date of receipt of letter].

IMPORTANT: ATTACH A COPY OF THE APPEAL COUNCIL'S LETTER TO THE COMPLAINT.

7. The decision of the Administrative Law Judge was erroneous, not supported by substantial evidence in the record, and/or contrary to law.

WHEREFORE, plaintiff respectfully requests that:

- (a) A summons be issued directing defendant to appear before the Court;
- (b) Defendant be ordered to submit a certified copy of the administrative record, including the evidence upon which the findings and decisions complained of are based;
- (c) Upon such record, this Court modify the decision of the defendant to grant plaintiff maximum monthly disability insurance benefits and/or Supplemental Security Income benefits retroactive to the date of initial disability, or in the alternative, remand the case to the Commissioner of Social Security for reconsideration of the evidence; and
- (d) The Court grant such other and further relief as may be just and proper.

8. Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this _____ day of _____, 20_____.

Signature of Plaintiff _____
