

Malcom Thompson
Clerk of the Circuit Court
Osceola County

2 Courthouse Square, Kissimmee, Florida 34741
Telephone (407) 742-3517

Request Form for Social Security Number Removal (SB 24-E)

Date: _____

Name of Holder of Social Security Number: _____

Phone Number:(Optional)_____

Mailing Address:_____

Email:_____

Relationship to Request:

Self

Attorney, specify

Legal Guardian, specify

For Redaction/Removal of Social Security Number from an Official Record Image on a Publicly Available Internet website, please provide:

Instrument Number/Book and Page Number/Document Type

Clerk# _____ Bk/Pg _____ Type _____

Clerk# _____ Bk/Pg _____ Type _____

Signature: _____

For Office Use Only:

Date Request Received: _____

Date Request Completed: _____

Clerk Processing Request: _____