

<p>Form G-615 (06-19)</p> <p>United States of America Railroad Retirement Board</p> <p>Employer's Supply Requisition</p>	<p>Prepare two copies, keep the second copy and forward the first copy to: U.S. Railroad Retirement Board 844 North Rush Street Chicago, Illinois 60611-1275 Attn: Stockroom or Fax to: 312-751-3377</p>	RRB Requisition Number
		Date of Requisition
		Requisitioned by
		Title

<p>Please ship to: (Give full name and address)</p>	Employer
	Phone:

Form Number	Description	Unit of Issue	Quantity	
			On Hand	Required
G-34	RRB Reminders - Card	Each		
G-615	Employer's Supply Requisition - Form	Each		
IB-2	Railroad Retirement and Survivor Benefits - Booklet	Each		
RB-3	Furnishing Evidence to Support Your Claim - Booklet	Each		
RB-20	Medicare for Railroad Workers and Their Families - Booklet	Each		
RB-40	RRB National Telephone Service - Pamphlet	Each		
UB-9	Railroad Unemployment and Sickness Benefits - Booklet	Each		
UB-10	Unemployment Benefit for Railroad Employees - Booklet	Each		
UB-11	Sickness Benefit for Railroad Employees - Booklet	Each		

Use spaces below for any additional forms required, identify by form number and title

This section to be used by Railroad Retirement Board

Order filled by	Date	Shipped by					Date shipped	
		USPS	UPS	FedEx				
Order packed by	Date	How shipped					Weight	
		Box	FedEx Bx	FedEx Env	FedEx Pak	Other	Pounds	Ounces