

# PRIVACY RELEASE AUTHORIZATION

I, hereby authorize Congressman Lloyd Doggett, in accordance with the Privacy Act of 1974, Public Law 93-579, to inquire on my behalf and authorize the agency listed below to release information to Congressman Doggett or his staff concerning my request for assistance:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> <b>SSA</b>         | <input type="checkbox"/> <b>Veterans</b>     | <input type="checkbox"/> <b>USCIS/Immigration</b> | <input type="checkbox"/> <b>Dept. of State</b> |
| <input type="checkbox"/> <b>Medicare</b>    | <input type="checkbox"/> benefits/healthcare | <input type="checkbox"/> application processing   | <input type="checkbox"/> immigrant visa        |
| <input type="checkbox"/> <b>DOL</b>         | <input type="checkbox"/> military pay        | <input type="checkbox"/> detention/removal        | <input type="checkbox"/> visitor visa          |
| <input type="checkbox"/> <b>USPS</b>        | <input type="checkbox"/> burials/memorials   | <input type="checkbox"/> <b>IRS</b> _____         | <input type="checkbox"/> passport              |
| <input type="checkbox"/> <b>Other</b> _____ | <input type="checkbox"/> medals/awards       | (tax year)  |  |

**PLEASE PRINT THE FOLLOWING INFORMATION (if applicable):**

Name \_\_\_\_\_ A # \_\_\_\_\_  
Address \_\_\_\_\_ Receipt/Case # \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Form type(s) \_\_\_\_\_  
Home Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Business Phone \_\_\_\_\_ Country of Birth \_\_\_\_\_  
Cellular Phone \_\_\_\_\_ Email \_\_\_\_\_

Are you facing a deadline?    yes \_\_\_\_\_ / no \_\_\_\_\_    When? \_\_\_\_\_

Have you contacted my office before about this matter?    yes \_\_\_\_\_ / no \_\_\_\_\_

**Briefly explain the issue in which you are requesting assistance:**

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**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I certify, under penalty of perjury, that (1) I provided or authorized all of the information in this privacy release and any document submitted with it; (2) I reviewed and understand all of the information contained in my privacy release and submitted with it; and (3) all of this information is complete, true, and correct.

**Please attach the most recent correspondence you have received from the federal agency and any other pertinent information regarding this case. Feel free to use other side or additional paper if needed.**

**Mail to:**

U.S. Rep. Lloyd Doggett, 300 East 8th St, Suite 763, Austin, TX 78701-3275 **or Fax to:** (771) 200-5836

**Email to:** [lloyd.doggett@mail.house.gov](mailto:lloyd.doggett@mail.house.gov)