

Privacy Act Release Form

I am aware that the Privacy Act of 1974 (P.L. 93-579) prohibits the release of information without my approval. I request Congressman Jodey Arrington to inquire on my behalf and do hereby give my permission for the appropriate information in my file to be released to him and/or his staff.

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL: _____

CITY: _____ ZIP CODE: _____

SOCIAL SECURITY NO: _____ DOB: _____

OTHER AGENCY FILE NO. (If applicable): _____

NATURE OF THE PROBLEM (Please describe the problem below and be specific as to the type of assistance you are requesting from the Congressman):

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

SIGNATURE: _____ DATE: _____

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