



United States Senator John Cornyn
GRANT/NON-IMMIGRANT INFORMATION AUTHORIZATION

I hereby authorize Senator John Cornyn to request on my behalf, pertinent to the Freedom of Information and Privacy Act, access to information concerning me in the files of the Bureau of Citizenship and Immigration Services and/or the Department of State. I am furnishing his office with the following information to aid in the inquiry.

(Please furnish as much information as possible pertaining to your request and attach a description of the difficulties that you are experiencing.)

INFORMATION ABOUT YOU:

ARE YOU THE PETITIONER? YES [] NO []
NAME: _____ PHONE NUMBER: _____
ADDRESS: _____
DATE AND PLACE OF BIRTH: _____
ALIEN REGISTRATION /A#: _____ SOCIAL SECURITY #: _____
DATE AND PLACE OF NATURALIZATION: _____

INFORMATION ABOUT BENEFICIARY OR FOREIGN VISITOR:

NAME(S) OF BENEFICIARY OR VISITOR: [Please include their relationship to you, their Full Name, Date of Birth, Place of Birth, Alien No. (if available), and Passport Number]

PRESENT ADDRESS AND TELEPHONE NUMBER OF BENEFICIARY:

IS THE PROSPECTIVE IMMIGRANT ALREADY IN THE U.S.? _____

INFORMATION ABOUT FORMS FILED:

THIS APPLICATION IS FOR AN: Non-Immigrant Visa [] Immigrant Visa []
TYPE OF APPLICATION FILED (Please include Form(s) filed): _____

DATE APPLICATION FILED: _____

LOCATION OF IMMIGRATION OFFICE, EMBASSY OR CONSULATE WHERE FILED:

SERVICE CENTER RECEIPT : _____

DEPARTMENT OF STATE CASE : _____

SIGNATURE: _____ **DATE:** _____

Return to: U.S. Senator John Cornyn
Occidental Tower
5005 LBJ Freeway, Suite 1150
Dallas, Texas 75244-6199
(972) 239-1310 (phone)
(972) 239-2110 (Fax)