

U.S. Congresswoman

Ginny Brown-Waite

Representing Citrus, Hernando, Lake, Levy,
Marion, Pasco, Polk, and Sumter Counties



Dade City - Privacy Authorization Form Congresswoman Ginny Brown-Waite Social Security

Date: _____

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

E-Mail Address: _____

Social Security #: _____ **Medicare#:** _____

Are you working with an Attorney: _____ **Attorney's name:** _____

Date of Birth: _____

I authorize Congresswoman Ginny Brown-Waite and her staff to contact appropriate agencies on my behalf. This is to comply with the Privacy Act of 1974, which provides that as of September 27, 1975, disclosures of information of a personal or confidential nature will no longer be permitted to third parties without the written consent of the individual involved.

Signature

Please Return To:
Member of Congress Ginny Brown-Waite
15000 Citrus Country Drive Unit 100
Dade City, FL 33523
Phone: (352) 567-6707
Toll Free (866) 492-4835
Fax: (352) 567-6259
Brown-waite.house.gov

PLEASE EXPLAIN YOUR PROBLEM ON THE BACK OF THIS FORM

Revised 4/11/07

