



# OFFICE OF CONGRESSWOMAN CANDICE S. MILLER

## Privacy Release Form

Date: \_\_\_\_\_

Congresswoman Candice S. Miller  
48653 Van Dyke  
Shelby Township, MI 48317  
(586)997-5010  
(586)997-5013 fax

Dear Congresswoman Miller:

I am asking for your assistance in the following matter. I understand that this form is necessary due to the Privacy Act of 1974.

(Please briefly describe the circumstances, including all necessary facts. You may use another piece of paper. Please enclose any pertinent documents.)

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Name (printed)

Signature

Street Address

City

State

Zip Code

Daytime Telephone Number

Social Security and/or Claim Number

A number

Application filed w/USCIS

Status in the United States

Email Address