Privacy Act Waiver/Authorized Release of Information Senate Assistance Requested Office of United States Senator Sheldon Whitehouse

As required by Public Law 93-579, the Privacy Act, I hereby request and authorize Senator Sheldon Whitehouse to intercede on my behalf, including the right to review all appropriate documentation that he or his staff deems necessary in connection with the application for assistance or any other action I have pending with the agency named below. I understand that any documents I provide to Senator Sheldon Whitehouse or his staff may be copied and forwarded to officials of the agency listed below for review.

I,to act on my behalf with rights in the release of any and all related info	, hereby authorize the Office of Senator Sheldon Whitehouse, and therefore, waive all rmation and records.
I also understand that this inquiry maconscience and without mental reservation.	ny not conclude in my best interest. I sign this waiver in good
DATE:	SIGNATURE
CLAIM NUMBER, or ALIEN "A" NUMBER FOR IMMIGRATION or VETERAN SERVICE NUMBER (IF APPLICABLE)	SOCIAL SECURITY NUMBER (IF APPLICABLE)
FOR OFFICE USE: CASE NUMBER	FOR OFFICE USE: STAFF:
STREET ADDRESS:	
CITY/STATE/ZIP:	
DAYTIME PHONE:	CELL PHONE:
FMAIL:	