OFFICE OF CONGRESSWOMAN CANDICE S. MILLER

Privacy Release Form

Date: _____

Congresswoman Candice S. Miller
48701 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

Email Address

YES or NO

Date of Birth A Number(INS only) Application filed with USCIS Citizenship Status