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E-Mail: Rick.Larsen@mail.house.gov  
http://www.house.gov/larsen

Congress of the United States  
House of Representatives  
Washington, DC 20515-4702

ARMED SERVICES

BUDGET

## Authorization Form

I am requesting assistance from Congressman Rick Larsen, and his staff, with a personal issue concerning a Federal agency (such as USCIS, DVA, SSA, etc).

*Please explain your situation or request and provide any relevant information. Feel free to attach relevant documents, copies, or other materials that support your claim.*

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*The Privacy Act of 1974 is a Federal law designed to protect you from any unauthorized use and exchange of personal information by Federal agencies.*

I understand that by signing, I give permission and authorize Congressman Larsen and his staff to receive any information from Federal agencies that they might need in order to provide assistance.

Name (Printed): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Alien Registration# \_\_\_\_\_

*Please list other offices or people (such as Senators or Representatives) you have contacted or are seeking help through and indicate if there are legal proceedings regarding your issue:*

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