

ENERGY AND COMMERCE COMMITTEE:

HEALTH SUBCOMMITTEE
CHAIRMAN

ENVIRONMENT AND HAZARDOUS
MATERIALS SUBCOMMITTEE

TELECOMMUNICATIONS AND THE
INTERNET SUBCOMMITTEE

NATURAL RESOURCES COMMITTEE:

FISHERIES, WILDLIFE AND
OCEANS SUBCOMMITTEE

DEMOCRATIC POLICY COMMITTEE:

COMMUNICATIONS CHAIR

<http://www.house.gov/pallone>

FRANK PALLONE, JR.
6TH DISTRICT, NEW JERSEY

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

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KILMER SQUARE
NEW BRUNSWICK, NJ 08901
(732) 249-8892

Dear Congressman Pallone:

I, the undersigned, do hereby request that you or your designated staff member investigate the following problem I am having with the agency listed below:

(Name of Agency or Organization in Question)

I understand this constituent waiver form is being used in compliance with the Freedom of Information Act and the Privacy Act of 1974, as amended.

Please Print or Type:

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

E-Mail Address _____

ID # or SSN _____ DOB _____

Signature _____ Date _____

Briefly explain the nature of your complaint or concern and attach copies of any documents you may have.

What steps have you taken so far? If possible, please include name of agency or persons you have contacted.

What have been the results of your efforts to date?

What would you consider a fair outcome?

Thank you.