

Release and Consent

Return to:
CONGRESSMAN Russ Carnahan
8764 Manchester Road, Suite 203
St. Louis, MO 63144

I, _____ request the assistance of your office in the following matter.

Social Security

Social Security Number

Veteran Affairs

C or CCS Number

Military

Branch

Other

List Federal Agency

Explain the nature of your problem:

I authorize Congressman Russ Carnahan or a member of his staff to make inquiries on my behalf regarding this issue.

Signature

Date

Name (Please print)

Address

Phone (Home)

City

Zip

Phone (Work)