

## Congressman Kenny Marchant 24<sup>th</sup> District of Texas

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Signature

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## **Congressional Inquiry Privacy Release Form**

The Privacy Act of 1974 prevents agencies from releasing information about you to anyone without your written consent. Therefore, Congressman Marchant must have your written authorization before he can open an inquiry on your behalf.

I hereby authorize you to release all relevant portions of my records or to discuss problems involved in

this case with Congressman Marchant or any authorized member of his staff until this matter is resolved. Signature Date Name (please print legibly) Address City/State Zip Alternate Number Telephone Number Social Security Number Date of Birth Alien ID Number **Honesty Policy** I understand that by requesting assistance of Congressman Marchant and his staff I am obligated to provide true and correct information regarding my situation. Failure to disclose all information or any deliberate attempt to mislead Congressman Marchant or his staff may result in the discontinuance of assistance.

Date