

## CONGRESSMAN HENRY A. WAXMAN

District Office • 8436 West Third Street • Suite 600 • Los Angeles • CA • 90048 (323) 651-1040 • (310) 652-3095 • (818) 878-7400 • (323) 655-0502- fax

## PRIVACY RELEASE FORM FOR PALMETTO CASES

In order for my office to assist you, please:

> Fill out all three pages of this form completely

> Enclose copies of any documents that are related to your case

If you have questions regarding this form, please contact my district office at (323) 651-1040 or (818) 878-7400.

Mrs.	Ms.	Miss	Mr.	Dr.	
*First Name		*Middle Initial			*Last Name
Practice N	ame				
Practice St	reet Address*				
*City, Stat	e and Zip Code				
Mailing A	ddress – if diffe	rent from prac	tice address		
Work Tele	phone Number	*H	lome Telephon	e Number	Cell Phone Number
E-mail Ad	dress				
NPI Numb	er(s)				

## Description of the Problem

\*What is the problem?

\*What have you done to try and resolve the problem?

\*What is the current status of the problem?

\*How many outstanding claims do you have? When was the last time you received payment?

\*Have you contacted any other office for assistance?

If yes, which office?

## Please read and sign the following:

By filling out this Privacy Release form, I hereby authorize my member of Congress and staff to conduct any inquiries regarding my case and to be provided with any information relating to it.

\*Date: \_\_\_\_\_

Signature:

Thank you for taking the time to complete this form. Please return it as soon as possible to my district office at the following address:

Congressman Henry A. Waxman 8436 West Third Street, Suite 600 Los Angeles, CA 90048 (323) 651-1040 (310) 652-3095 (818) 878-7400 (323) 655-0502 - fax