D.C. Congressional Office 1730 Longworth Building Washington DC 20515 Phone: 202-225-7761

Fax: 202-225-4282

Congressman David G. Reichert

Member of Congress Washington's 8th Congressional District



District Congressional Office 22605 SE 56th St, Suite 130 Issaquah, WA 98029 Toll Free: 877-920-9208

Phone: 425-677-7414 Fax: 425-270-3589

www.reichert.house.gov

Casework Authorization Form

Please print legibly

		1	rease pri	110 10	51019			
Full Name:				I	Date of Birth:			
on behalf of: (if applicable)					cial Security #:			
Relationship: (if applicable)					ome Phone #:			
Mobile Phone #:				V	Vork Phone #:			
E-mail:					Fax #:			
Mailing Address:				Ph	ysical Address: (if different)			
City:			State	::			Zip Code:	
Claim/File #								
Federal Agency(ie	s) involve	ed:						
Constituent Permission Please Note: The Privacy Act requires that you authorize access to your private records and authorize this office to release information. Without your authorization, an inquiry on your behalf will not be possible. Desired Resolution:								
Please give a detailed description of your situation with the specified federal agency. (Please feel free to use additional sheets of paper):								
I hereby request th	ne assista	nce of the Office of I	Jnited S	tate	s Representative	Davi	d G. Reichert i	n resolving the
I hereby request the assistance of the Office of United States Representative David G. Reichert in resolving the matter described in this document and I authorized Reichert and his staff to receive and/or release any								
information needed to provide assistance.								
Signature:						Date:		
Please print and fax or mail to our District Office along with copies of any other documentation that you think might be helpful to us when making an inquiry on your behalf. We are not permitted to accept gifts for any services you receive. We look forward to assisting you. Thank you.								