

OFFICE OF U.S. SENATOR JOHN E. WALSH

Privacy Act Release

Due to provisions of the Privacy Act of 1974 (5 USC § 552a), I must have your written permission before I can make an inquiry on your behalf and/or receive any information to complete your request.

I hereby authorize you to make inquiries to the appropriate parties on my behalf.

Signature _____ Date _____

(Form must be signed before mailing or faxing)

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First Name _____

Last Name _____

Mailing Address _____

City _____

State _____

Zip Code _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email _____

SSA or File Number _____

Date of Birth _____



Please print or type your request and a brief explanation below. You may attach additional pages if necessary as well as any other documentation which might help resolve your problem. ***Please only provide copies of documents and not your originals.***

Request Details _____

