



Dr. Michael C. Burgess

United States Congressman

Representing Texas' 26th District

Request for Congressional Inquiry with the U.S. Department of State (DOS) Consul

The Privacy Act of 1974 (Public Law 93-579) prevents agencies from releasing information about you to anyone without your written permission. Therefore, Congressman Burgess must have your written authorization before he can obtain a response regarding the Request for Congressional Inquiry on your behalf.

I hereby authorize the release of any and all information pertaining to my case to Congressman Michael C. Burgess, M.D. and/or any member of his staff.

Signature of person for whom we are inquiring

Date

Name of Constituent:

Address: Email:

City/State/Zip:

Telephone: (H) (B) (C)

Name of Applicant for whom you are applying:

Relationship to Applicant for whom you are applying:

Has he/she previously visited the U.S.? Current Address:

City/State/Country:

Telephone: (H) (B) (C)

Date of Birth: Country of Birth:

Name as it appears on the Passport: Passport#:

Benefit applied: Interview/Date Filed: Consul Location:

Description of the Problem:

[Blank lines for description of the problem]

Should you desire information regarding this inquiry be shared with another individual, please name that person and complete the following information:

I authorize the release of information for this inquiry to: Name of your spouse, family member, or trusted friend

Signature of Individual Requesting Inquiry:

Date