

CONGRESSMAN PATRICK MURPHY FLORIDA'S 18TH DISTRICT

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The Privacy Act of 1974 (Public Law 93-579) requires you provide written consent before information can be disclosed from federal agency records. Please sign the following statement so that Congressman Murphy can make an inquiry on your behalf. If you are inquiring on behalf of someone else, that person must sign this release form.

Full Name: Phone:		one:
Street Address:		
City:	State:	Zip Code:
E-mail Address:		
Date of Birth:	Social Security Number:	
Relevant Identification Numbers (Vet	eran Claim #, Alien #, e	etc.):
() Check here to receive email update	ates from Congressman	Patrick Murphy.
In accordance with the Privacy Act, I staff to inquire on my behalf. I also a regarding this inquiry to the office of	uthorize that agency to	
Signature:		Date:
Describe the problem you are having b	below. Feel free to atta	ch relevant documentation.