

Privacy Release Form Congressman Bill Flores 17th Congressional District, Texas

400 Austin Avenue, Suite 302 Waco, Texas 76701 Phone: (254) 732-0748 Fax: (254) 732-1755 3000 Briarcrest Drive, Suite 406 Bryan, TX 77802 Phone: (979) 703-4037 Fax: (979) 703-8845

14205 Burnet Road, Suite 230 Austin, TX 78728 Phone: (512) 373-3378 Fax: (512) 373-3511

Name	
Address	_ City/State/Zip
Home Phone	Business Phone
Cell Phone	Email
Please complete sections applicable to your case:	
Social Security Number	Date of Birth
Veterans Claim Number	Military ID and Branch
Other numbers identifying your case	
Types of benefits I am seeking	
Date and Place claim was filed	
Federal Agency involved	
Additional information/explanation of request (you may attach additional documentation):	

Have you contacted other members of the Senate/House of Representatives about this issue?

In accordance with the provisions of the Privacy Act, I hereby authorize Congressman Bill Flores, or a member of his staff, to make the appropriate inquiry on my behalf. I understand that by requesting the assistance of Congressman Bill Flores or a member of his staff, I am obliged to provide truthful information regarding my situation. Failure to disclose all information or any deliberate attempt to mislead Congressman Bill Flores or a member of his staff may result in the discountenance of assistance.

Signature:_

Date:_

The Privacy Release Act of 1974 is a federal law designed to protect you from any unauthorized use and exchange of personal information by federal agencies. Any information that a federal agency has on file regarding your dealings with the United States government may not, with a few exceptions, be given to another agency or Member of Congress without your written permission. Family members, friends, or other interested parties generally may not authorize on your behalf the release of information covered by the Privacy Act.