

Office of Congressman Steny Hoyer (MD-5)

Privacy Release Form

Under the Federal Privacy Act of 1974, we must have a signed privacy release form outlining your problem or a signed letter which clearly states your issue. This provides our office permission to look into the matter on your behalf. Please send the SIGNED release form or letter to the appropriate District Office via US Postal Service, fax or deliver it in person. Please include any relevant identifying information and supporting documents which relate to your inquiry. WE CAN NOT ACCEPT EMAIL and MUST HAVE YOUR SIGNATURE AND EXPLICIT REQUEST FOR ASSISTANCE TO LOOK INTO A MATTER ON YOUR BEHALF.

Please return via mail, fax or in person to the appropriate office:

If you live in Prince George's, Anne Arundel or Calvert County

Congressman Steny Hoyer
US District Courthouse
6500 Cherrywood Lane, Suite 310
Greenbelt, MD 20770
Phone: 301-474-0119
Fax: 301-474-4697

If you live in Charles or St. Mary's County

Congressman Steny Hoyer
401 Post Office Road, Suite 202
Waldorf, MD 20602
Phone: 301-843-1577
Fax: 301-843-1331

Date: _____

Please provide applicable identifying information

Social Security Number: _____ VA Claim Number: _____

Immigration Case Number: _____ Alien Number: _____

Mortgage Loan Number: _____ +

I request assistance in resolving the following problem I am having with **(LIST AGENCY)**

Explain the problem including dates, locations, names: Use reverse side if necessary, include copies of applicable supporting documents.

I authorize (agency name) _____ to provide requested information related to my case to Congressman Hoyer and his staff.

Signature

Print Name

Address: _____

Street

Apt #

City

State

Zip

Telephone: _____ Email: _____