



**PRIVACY RELEASE FORM**

Due to the enactment of the "Right to Privacy Act," it is necessary for you to complete and sign this form authorizing our office to obtain information needed to respond to your request for assistance. The information obtained should be only that which is related to the issue you presented to our office.

Name: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Please provide any agency case numbers that reference your case (i.e. Tax ID No., Veterans Administration Claim No., Alien Registration No., Military ID No.) \_\_\_\_\_

Please explain the nature of your issue and attach any correspondence which supports this statement or which relates to your case: (If necessary, use additional paper.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please state the outcome you are seeking: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that for you to respond fully to my request, it may be necessary for your office to review federal records which may contain information you may need to assist me. By signing this form, I hereby authorize the appropriate federal agencies to release to your office such information as you may require.

**Further, by signing this form, I understand that your office HAS NOT ACCEPTED my case and that upon review of this form, your office will determine whether or not my case will be accepted and advise me of such.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form to the Houston District Office: 3003 South Loop West, Suite 460, Houston, TX 77054.

*Congressman*  
**AL GREEN**  
REPRESENTING THE NINTH DISTRICT OF TEXAS



CASE I.D. NO. \_\_\_\_\_

**AUTHORIZATION TO RELEASE/FORWARD OR  
RETURN CASEWORK DOCUMENTS**

To the Office of Congressman Al Green:

I, \_\_\_\_\_, have received your correspondence regarding my request for assistance from the Office of Congressman Al Green indicating that I do not live in his Congressional District and: *(please select ONLY one response below)*

- I request that the Office of Congressman Al Green forward my documents to the Congressperson who represents me.
- I request that the Office of Congressman Al Green return my documents to me at the address that I provided on my completed Privacy Release Form.

***NOTE: If we do not receive this properly completed form on or before \_\_\_\_\_, we will return your documents to you.***

I understand that upon my documents being forwarded to the appropriate Congressional office or returned to me, my case will be considered closed within your office.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Congressman*  
**AL GREEN**  
REPRESENTING THE NINTH DISTRICT OF TEXAS



CASE I.D. NO. \_\_\_\_\_

**CASE DUPLICATION ATTESTATION**

To the Office of Congressman Al Green:

I, \_\_\_\_\_, have not contacted another Congressional office about my case (I.D. number \_\_\_\_\_) and to my knowledge; no Congressional office is working on this/these matter(s).

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date