

PRIVACY RELEASE FORM-REQUEST FOR CONGRESSIONAL INQUIRY

Date: _____
Name: _____ E-mail: _____
Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Work/Cell Phone: _____
ID# (SSN, VA, etc.) _____ Date of Birth: _____

Federal Agency Involved: _____

Have you ever contacted our office before? _____

Have you contacted another congressional office regarding this matter? _____

If "yes" to the above, which office & when? _____

Is this matter currently pending before a local, state, or federal court? _____

Please briefly explain your problem and outline the steps that have been taken by you and the agency with regards to your situation. If you need additional room, feel free to attach a letter or write on the back of this form.

I hereby authorize Congresswoman Matsui or her representative to have access to any information and records pertaining to this matter. Please inform her District Office directly of the results of this inquiry as soon as possible.

Signature: _____