

The Honorable Kay Granger

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Privacy Act Statement

*I hereby authorize **Congresswoman Kay Granger** to request on my behalf, pertinent to the Freedom of Information Act and Privacy Act, access to information concerning me in the files of*

Department or Agency

Congresswoman Kay Granger is also authorized to see any material that may be disclosed that I request, and to speak in my behalf.

NAME _____ **Date of Birth** _____

ADDRESS _____ **Country of Birth** _____

TELEPHONE _____ **OFFICE** _____
(If no telephone, give number where you can be reached) **E-MAIL** _____

LIST ANY OR ALL IDENTIFYING NUMBERS WHICH MIGHT APPLY TO YOUR SITUATION:

Social Security # _____ **VA #** _____

Immigration "A" _____ **Date filed:** _____

BRIEFLY STATE THE OUTCOME YOU ARE SEEKING: _____

PLEASE STATE THE NATURE OF YOUR PROBLEM: (be specific) _____

(If you need more space please continue on the back of the page)

YOUR SIGNATURE _____ **DATE** _____
(Please be sure to sign your name)

CASEWORKER: _____