

Request for Congressional Assistance (Immigration)

Congressman Howard L. Berman _____ Date: _____

Staff Member: Rosie Villegas _____ Telephone # (818) 994-7200

Beneficiarie's Name: _____ A# _____

Current Address: _____

Telephone Number: (home) _____ (work) _____

Date of Birth: _____ Country of Birth _____

Date & Place of Entry _____

Proof of Admission (When Necessary)
(Copies Only; For example, I-94, Passport, etc.) _____

Type of Application: _____ Date Application Filed: _____

Proof of Filing: (copies of receipts) _____

Name of Petitioner (if any) _____
(or other person requesting assistance)

Address: _____
Street City Zip

Telephone Number: _____ Relationship to Alien _____

Description of Problem:

*Authorization: The above information is true to the best of my knowledge. I hereby authorize
Congressman Berman or his staff to inquire with U.S. [INS/State Department](#) officials on my behalf.*

Signature of Constituent _____ Date: _____

Please print out the above form and fill it in completely. Completed forms and accompanying materials should be sent to:

Congressman Howard L. Berman
14546 Hamlin Street, #202
Van Nuys, CA 91411
Attn: Rosie Villegas