## Congress of the United States

Washington, DC 20515

The Honorable Congressman Bill Posey 2725 Judge Fran Jamieson Way Building C Melbourne, FL 32940-6605 321-632-1776 321-639-8595 Fax 888-681-1776 Toll Free www.house.gov/posey

## NOTICE

The PRIVACY ACT of 1974 requires that written consent be obtained from the constituent before information can be disclosed from records with a federal agency. So that I might act on your behalf, I would appreciate it if you would sign the following statement. (If you are inquiring on behalf of another person, it is necessary that they sign the statement).

DATE:	EMA	AIL:		_	
NAME (Mr.) (Mrs.) (M	(s.) (Dr.) (Rev.):				
ADDRESS:			APT #: NTYZIP CODE (+4):		
CITY:	STATE:	COUNTY	<b>ZIP CODE (+4):</b>		
I am a permanent resider	at of Brevard, Osceo	la, Polk or Indian Rive	er County (yes)	_(no)	
HOME PHONE:	WORK PHONE:		CELL:		
***When applicable ple	ase supply the follo	wing information:			
SOCIAL SECURITY/MEDICARE #:			DATE OF BIRTH		
ALIEN #: A ID #:		VETERAN CLA	<u>.IM</u> #: C		
ID #:	Federal Agency (id	es) you request I cont	tact		
PASSPORT LOCATO	R NUMBER:	, •			
may be attached)	,	·	tinent documents expl	_	
What outcome do you					
at outcome do you					
SIGNATURE: (**requi	red)				

\*\*Please note, if the matter in which you request my help is not a federal matter, I may be limited in authority or I may be precluded from intervening on your behalf due to Congressional Code of Ethics. Please forward all state matters to your local State House or State Senator's attention for their review. Their numbers are listed in the front section of your local phone directory. (Typically state matters include HRS matters, food stamps, child support issues, Medicaid, Voc Rehab, State Workers Comp., Brevard Workforce, State Unemployment.)