



# The Honorable Kay Granger

## 12<sup>th</sup> Congressional District of Texas

District Office  
1701 River Run, Suite 407  
Fort Worth, Texas 76107  
Phone: (817)338-0909  
Fax: (817)335-5852

Washington D.C. Office  
1026 Longworth HOB  
Washington, DC 20515  
Phone: (202)225-5071  
Fax: (202)225-5683

### Congressional Inquiry Privacy Act Release Form

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Country of Birth

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip Code

(\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

Are you a resident of Texas Congressional District 12? \_\_\_\_\_

Do you have an open case with this office or another congressional office? \_\_\_\_ Yes \_\_\_\_ No

If yes, which office(s)? \_\_\_\_\_

Federal Agency this inquiry is related to? \_\_\_\_\_  
(i.e. VA, SSA, USCIS, IRS, USPS, etc.)

Date of initial contact with federal agency? \_\_\_\_\_

List any or all identifying numbers which might apply to your situation. My office will use this information only to obtain information regarding your case.

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
VA Number

\_\_\_\_\_  
Any other relevant identifying Number

\_\_\_\_\_  
Taxpayer Identification Number

#### Alternate Point of Contact

I authorize, \_\_\_\_\_, as an alternate point of contact and authorize the aforementioned person to receive updates from Congresswoman Kay Granger and staff regarding my case.

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

*Except in limited circumstances, this office will NOT work with a personal representative receiving a fee for representing the constituent. This office will maintain communication directly with the constituent and, if the constituent chooses, the constituent may forward such to a personal representative. This is in an effort to protect the constituent. A congressional office cannot ensure the constituent will not be billed by a personal representative for services the congressional office is performing free of charge.*



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### Congressional Inquiry Privacy Act Release Form

The Privacy Act of 1974 (5 U.S.C. § 552a) requires that Members of Congress or their staff have written authorization before they can obtain information about an individual's case. Once you have completed the Privacy Act Release Form, please return it to the **District Office**. Attach **copies** of any relevant documentation in connection with your case (correspondence, decisions, etc.).

*I hereby authorize the release of any information regarding my case to Congresswoman Kay Granger and staff. In addition, I hereby authorize Congresswoman Kay Granger and staff to speak on my behalf in matters concerning this inquiry.*

I certify, under penalty of perjury, that

- 1) I provided or authorized all of the information in this privacy release and any additional documents;
- 2) I reviewed and understand all of the information contained in my privacy release ; and
- 3) all of this information is complete, true, and correct.

**Date of Birth:** \_\_\_\_\_

**Signature** (We must have your signature to precede with any case.) \_\_\_\_\_

**Name (Print)** \_\_\_\_\_

For USCIS Cases only

**A Number:** \_\_\_\_\_

**Receipt Number:** \_\_\_\_\_

Form Type: \_\_\_\_\_

Staff Member: \_\_\_\_\_

Date of Filing: \_\_\_\_\_

Phone: 817-338-0909

Country of Birth: \_\_\_\_\_

Staff Email: \_\_\_\_\_

**Briefly describe the situation (if you need more space, please continue on the back of this page):**

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**In one sentence, please state your anticipated outcome:**

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*\*Please note: If you are requesting your case be expedited please attached documented reason for inquiry. This can include eviction notice, utility shut-off or terminal illness documentation. Providing these documents does not guarantee your case will be expedited but will aide in showing the agency a need to expedite.*