

PRIVACY ACT CONSENT FORM

In accordance with the provisions of the Privacy Act of 1974, as amended (Public Law 93-579) which took effect on September 27, 1975, I give my consent for information concerning me to be furnished to the Office of United States Senator Mark Udall. I request that any relevant information the Senator may require in order to assist in responding to my inquiry, as his constituent, be provided to him in accordance with the provisions of the law. I hereby authorize the

(Name of Agency)

to release information from my records to the Office of Senator Mark Udall concerning: (provide details under separate letter):

until the above issue is resolved.

Signature

Date

PLEASE PRINT THE FOLLOWING INFORMATION:

Full Name _____
Address _____ City _____
Phone _____ Zip Code _____
E-mail _____

To begin your inquiry, the Office of Senator Mark Udall requires the following information **as applicable** to your case.

A# _____
Social Security # _____
Claim # _____
CIS Case # _____
Date and Place of Birth _____

What other Congressional offices have you contacted? _____

Please return this form to the Office of Senator Mark Udall at 999 18th Street, Suite N1525, Denver, CO 80202. Phone: 303-650-7820. Fax: 303-293-0507