



# Congressman Jared Polis (CO-2)

1644 Walnut Street · Boulder, CO · 80302 · phone (303) 484-9596 · fax (303)568-9007

## Privacy Authorization Form

*For assistance with any federal agency, please print and fill out this form and fax or mail it to Congressman Polis' Boulder Office: 1644 Walnut Street, Boulder, CO 80302 fax: 303/568-9007. \* Do not send your Social Security Number via email.*

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Agency Involved: \_\_\_\_\_

Case or File Number (if other than SSN): \_\_\_\_\_

Date and Place Claim was filed: \_\_\_\_\_

Please describe problem in detail (attach a separate sheet, if necessary): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*If you are working with another congressional office, please indicate:* \_\_\_\_\_

In accordance with the provisions of the Privacy Act, I hereby authorize Congressman Jared Polis or a member of his staff to make the appropriate inquiry on my behalf.

Sincerely,

\_\_\_\_\_  
(Signature)