Privacy Release Form

The Privacy Act of 1974 prohibits the government from revealing any information from personal files of individuals without the express written permission of the person involved. Disclosure of personal records to a Senator who is acting on behalf of a constituent is prohibited, unless the individual to whom the record pertains has consented.

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Warnock to make an inquiry on	ny behalf to the following Federal agency:
I, the undersigned, hereby authorize the release of all pertinent information to U.S. Senator Raphael Warnock to make an inquiry on my behalf to the following Federal agency: (Name of Federal Agency) Name: Address: City, State, Zip Code: Social Security #: Date: (Signature: (Signature is required) Please give a brief description of your problem below: (include a second sheet if needed)	
Name:	
Address:	
City, State, Zip Code:	
Social Security #:	Other ID #:
Telephone #:	Email:
Signature:	Date:
(Sig	ature is required)
Please give	

Office of U.S. Senator Raphael Warnock 201 17th Street SW 530 Atlanta, GA 30004 E-mail: casework@warnock.senate.gov