



RAPHAEL WARNOCK



UNITED STATES SENATOR • GEORGIA

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.

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 #: _____ Other ID #: _____

Telephone #: _____ Email: _____

Signature: _____ Date: _____

(Signature is required)

Please give a brief description of your problem below:

(include a second sheet if needed)

Please return the signed and completed form to:

Office of U.S. Senator Raphael Warnock
201 17th Street NW, Suite 530
Atlanta, GA 30004
Fax: 770-612-2471
E-mail: casework@warnock.senate.gov