

DONALD S. BEYER, JR.  
8TH DISTRICT, VIRGINIA

COMMITTEE ON WAYS AND MEANS

COMMITTEE ON  
SCIENCE, SPACE, AND TECHNOLOGY

WASHINGTON OFFICE:  
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1901 N. MOORE STREET  
SUITE 1108  
ARLINGTON, VA 22209

**Congress of the United States**  
**House of Representatives**  
**Washington, DC 20515-4608**

**Privacy Release Form**

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Phone (work or cell): \_\_\_\_\_

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

-Please provide any agency case numbers regarding your case (i.e. Tax I.D. number, Veterans Administration claim number, Alien Registration number, Military I.D., etc.) \_\_\_\_\_

-Please explain the nature of your problem and attach any correspondence which supports your statements or which relates to your case. (If necessary, use additional paper.)

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

-Please state the outcome(s) you are seeking: \_\_\_\_\_

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

I am aware that the Privacy Act of 1974 prohibits the release of information regarding my case without my express written approval. Therefore, I authorize the release of information regarding my concerns to the office of Congressman Donald S. Beyer, Jr.

Signed: \_\_\_\_\_

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

Please print this form, complete it and return it to:

Congressman Donald S. Beyer, Jr.  
1901 N. Moore St. Suite 1108  
Arlington, VA 22209  
E-mail: [beyer.district.office@mail.house.gov](mailto:beyer.district.office@mail.house.gov)  
Phone: 703-658-5403  
Fax: 703-658-5408