Senator Mike Lee, Utah

Consent for Release of Personal Records

I am requesting that the office of Senator Mike Lee investigate a matter on my behalf. Any information and records that may be of assistance to Senator Lee and his staff in resolving this problem may be released to them, including information and records which are protected by privacy laws. I understand that this form is being used in accordance with the Privacy Act of 1974.

Name: _____
First Middle Initial Last

Full Address:_____

Home #_____Cell#_____Email_____

Social Security Number _____ Date of Birth: _____

Case or File Number: _____ Loan Number:_____

Are you currently working with another Congressional or Senator's office? _____

Are you currently working with legal counsel? _____

If so, who? _____

Do you have any pending issues with the IRS? _____

Have you been charged of any crimes? _____

I understand that by requesting the assistance of Senator Lee and his staff I am obligated to provide true and correct information regarding my situation. Failure to disclose all information or any deliberate attempt to mislead Senator Lee or his staff may result in the discontinuance of assistance.

_____ _____

Signature Date

Return to: 125 S State Street, Suite 4225 Salt Lake City, UT 84138/ phone: 801.524.5933 fax: 801.524.5730

It is <u>critical for you</u> to provide a detailed explanation of the problem and a time line of related events. Use additional paper if necessary.

Detailed Explanation:

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