MIKE LEE
U.S. SENATOR *for* 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.

APPLICANT/PETITIONER NAME: _____
First Middle Last

ADDRESS: _____
Street Apt. City State Zip

CELL: _____ EMAIL: _____

DATE OF BIRTH: _____ COUNTRY OF BIRTH: _____

BENEFICIARY NAME *(if applicable)*: _____
First Middle Last

BENEFICIARY DATE OF BIRTH: _____ COUNTRY OF BIRTH: _____

USCIS FORM: _____ RECEIPT NUMBER: _____

A#: _____ RECEIPT DATE: _____

STATE DEPT. CASE NUMBER & LOCATION: _____

I certify, under penalty of perjury, that I provided or authorized all of the information in this privacy release and any submitted documents. I reviewed and understand all of the information contained in my privacy release and any submitted documents. All of this information is complete, true, and correct. I authorize USCIS and the Department of State to release information contained in my agency records as relevant to my case, and to the extent permitted by law, to Senators Lee and his staff.

_____ _____
Petitioner/Applicant Signature *(electronic signatures are not valid)* Date

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

It is critical for you to provide a detailed explanation of the problem and a time line of related events. Feel free to attach a typed response or use additional paper if necessary.
Please list all forms filed with USCIS and their respective receipt numbers and receipt dates.

DETAILED EXPLANATION:

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