

United States Senate

WASHINGTON, DC 20510-1104

RELEASE AND AUTHORIZATION

To Whom It May Concern:

I hereby authorize U.S. Senator Mazie K. Hirono to inquire about:

and to receive information and copies of all matters contained therein; and pursuant to the Privacy Act, I hereby release my records to Senator Hirono to use on my behalf and for my benefit; and that I have specifically asked Senator Hirono to pursue these matters for me and authorize her to write letters on my behalf and to receive replies.

Print Full Legal Name _____

Last four digits of your Social Security Number _____

Signature _____

Date _____

Date of Birth _____

Case #, Loan #, Claim #, Alien #, Registration #, etc. _____

Mailing Address _____
Street address, City, State, Zip Code

Phone Number(s) _____

Email Address _____

Which federal agencies have you contacted about this issue? _____

Have you hired an attorney to represent you in this matter? _____