

Congressman Pete Sessions (TX-17)

Privacy Release Form

After filling out the information boxes below you can mail or fax this privacy release form and any relevant materials to the district office that serves your area.

District Office Addresses:

Waco: 400 Austin Ave, Ste 302 Waco, TX 76701-2139	Huntsville: 901 Normal Park Dr, Ste 208 Huntsville, TX 77320-3770	Lufkin: 300 E Shepherd Ave, Ste 210 Lufkin, TX 75902-3252	Nacogdoches: 3034 Raguet St Nacogdoches, TX 75965-2852
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1. Full name:

2. Address:

3. State:

4. Zip code:

5. Date of birth: (##/##/####)

6. Social Security Number:

_____ - _____ - _____

7. Primary phone number:

_____ - _____ - _____

8. Primary e-mail:

11. Federal Agency Involved:

12. Brief summary of your request:

Please attach any additional information necessary.

In accordance with the provisions of the Privacy Act, I authorize Congressman Pete Sessions and his staff to make appropriate inquiries on my behalf to a government agency to assist with my case. I understand that by making this request, I am obligated to provide truthful information in this privacy release and any document submitted with it. All information given is complete, true, and correct to the best of my knowledge.

Signature: _____ Date: _____

Signature of guardian or power of attorney if necessary: _____