



The Privacy Act of 1974 (Public Law 93-579) requires your written authorization for my office to contact government agencies on your behalf or discuss your case in detail. The Privacy Act authorizes the disclosure of records to congressional offices acting on behalf of constituents only when the individual has consented.

Contact Information

Name (Print):
Address:
Phone: (mobile), (home), (work)
Email:

Case Information

Federal Agency:
Case or Claim Number:
Date of Birth: Social Security Number:

Case Description

Please be as detailed as possible regarding the assistance you are requesting and include any relevant documents/notices from the federal agencies processing your case. If necessary, you may continue the description on a separate page.

Multiple horizontal lines for case description text entry.

List any other individuals with whom we may share information:
Have you contacted another Congressional office regarding your case? (If yes, please list.)

Privacy Statement

I, _____, hereby authorize Senator Gary Peters and his staff to work on my behalf with any federal agency relevant to the matter described above, to receive and review any information contained in my file, and, if necessary, to forward any pertinent correspondence sent by me regarding this matter.

Signature: _____ Date: _____

To return this form to the Detroit office:
Mail: U.S. Senator Gary Peters
Attn: Constituent Services
477 Michigan Avenue, Suite 1837
Detroit, MI 48226
Email: Casework@peters.senate.gov
Fax: (313) 967-0296