



**Los Angeles Office:**  
1645 Corinth Avenue, Suite 101  
Los Angeles, CA 90025  
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[Lieu.Casework@mail.house.gov](mailto:Lieu.Casework@mail.house.gov)

## Congressman Ted W. Lieu

### Privacy Release Form

In order for my office to assist you, please:

- Fill out all pages of this form completely
- Include any relevant documentation

If you have questions regarding this form, please contact my Los Angeles office at (323) 651-1040.

#### *Personal Information*

##### **Petitioner/Applicant:**

Prefix: ☐ Mrs. ☐ Ms. ☐ Miss ☐ Mr. ☐ Mx. ☐ Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Application Form Number: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Alien Registration Number (No SSN for USCIS cases): \_\_\_\_\_

##### **Beneficiary (if applicable):**

Prefix: ☐ Mrs. ☐ Ms. ☐ Miss ☐ Mr. ☐ Mx. ☐ Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

##### **Constituent contact information:**

Residential Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different from Residential): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

## *Description of the Problem*

Which USCIS office or US Embassy is working on your case? \_\_\_\_\_

What is the current problem? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What steps have you taken to try to resolve the problem? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What has the federal agency told you? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you contacted any other office (elected officials, non-profits, attorneys etc.) for assistance?

☐ Yes (If so, which one(s)? \_\_\_\_\_) ☐ No

### **USCIS requires this section to be completed:**

I certify under penalty of perjury, that 1) I provided or authorized all of the information in this privacy release and any document submitted with it; 2) I reviewed and understand all of the information contained in my privacy release and submitted with it; and 3) all of this information is complete, true, and correct.

I, (print your name) \_\_\_\_\_ authorize USCIS to release information contained in my USCIS records as relevant to checking my case status, and to the extent permitted by law, to Representative Lieu and the Member's staff.

### **Please read and sign the following:**

By filling out this Privacy Release form, I hereby authorize my member of Congress and staff to conduct any inquiries regarding my case and to be provided with any information relating to it.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Thank you for taking the time to complete this form. Please print and return it as soon as possible to my Los Angeles office via fax, email, or mail to the following address:

Congressman Ted W. Lieu  
1645 Corinth Avenue, Suite 101  
Los Angeles, CA 90025  
**Phone:** (323) 651-1040 **Fax:** (323) 655-0502  
**Email:** [Lieu.Casework@mail.house.gov](mailto:Lieu.Casework@mail.house.gov)