



Los Angeles Office:
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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

Prefix: ☐ Mrs. ☐ Ms. ☐ Miss ☐ Mr. ☐ Mx. ☐ Other: _____

First Name: _____ Middle Initial: _____ Last Name: _____

Date of Birth: _____ Social Security Number: _____

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: _____

Agency Specific Information (if applicable)

Relevant Tax Year(s) (IRS): _____ Medicare Number (CMS): _____

Housing Authority (HUD): _____

Description of the Problem

What is the relevant federal agency(s)? _____

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-profit organizations, etc.) for assistance?

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

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:

ATTN: Constituent Services
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