

CASEWORK PRIVACY RELEASE FORM

Mail to:

Senator Blanche L. Lincoln
912 West Fourth Street
Little Rock, AR 72201

Date: _____

Name: _____

Home Phone: _____

Work Phone: _____

Agency Involved:

Social Security Number/File #:

Have you contacted our office before? _____

Is this matter currently pending before a local, state or federal court? _____

Problem: Please briefly explain your problem and outline the steps that have been taken by the agency with regards to your situation. In addition, please make your request for assistance specific as possible. This will enable the Senator to better understand your needs in her efforts to assist you.

I hereby authorize U.S. Senator Blanche L. Lincoln to make inquiries and obtain information regarding my case currently pending with the above mentioned federal agency.

SIGNATURE: _____

FOR OFFICE USE ONLY:

Received by: _____

Caseworker: _____