

# Congress of the United States

## House of Representatives

### Office of Congressman Gregorio Kilili Camacho Sablan Casework Consent and Information Form

*The Privacy Act of 1974 requires that Members of Congress or their staff have written authorization before they can obtain information about an individual's case. Please fill out this form completely. Your signature is required to proceed with a casework inquiry.*

**Petitioner:** \_\_\_\_\_

**Beneficiary 1 :** \_\_\_\_\_

**Place of Birth (State/Country):** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Alien #:** \_\_\_\_\_ **Case/Claim #, if any:** \_\_\_\_\_

**Beneficiary 2 (if applicable) :** \_\_\_\_\_

**Place of Birth (State/Country):** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Alien #:** \_\_\_\_\_ **Case/Claim #, if any:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Federal Agency/Department(s) Involved:** \_\_\_\_\_

I, \_\_\_\_\_, authorize the U.S. Citizenship and Immigration Services and other agency(ies), department(s) or organization(s) listed above to release information relevant to my case to Congressman Sablan and/or his staff. I further authorize Congressman Sablan and/or his staff to request and have access to all records, information, and reports pertinent to my request for his assistance in the following matter:

**Nature of Problem:** *Please use additional pages if needed.*

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, \_\_\_\_\_, 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 Congressman Sablan and/or his staff.

**SIGNATURE** (sign in ink): \_\_\_\_\_ **DATE:** \_\_\_\_\_

***Please print, sign and date this form. Then return via email, fax, or mail to:***

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