U.S. Senator Martin Heinrich Privacy Release Form



Please provide the information requested below and sign at the bottom. On page two of this form, please include as many details as possible, along with copies of any relevant documentation.

Name:	
Address:	
City and State:	Zip:
Home Telephone:	Work Telephone:
Cell Phone:	E-mail Address:
Date of Birth:	Social Security #:
Federal Agency involved:	
If Applicable: Case or Claim #Military I.D. #	
Alien # (If applicable)	CSA #
Passports: Locator # Date of Departure: Destination:	
Do you currently have a case pending before a local, state, or federal court in regard to this matter?	
\square NO \square YES, with a local, state, or federal court	
Have you contacted, or do you plan to contact any other member of the New Mexico Congressional Delegation regarding this matter?	
\Box No \Box YES (check all that apply): \Box Lujan \Box Stansbury \Box Leger Fernandez \Box Herrell	
Have you contacted Governor Lujan Grisham's office regarding this issue? \Box Yes \Box No	
U.S. Senator Martin Heinrich and his staff have my permission to make inquiries into my personal records and/or files as necessary to assist me in the matter I have presented to him and his staff.	
Signature:	Date:



U.S. SENATOR MARTIN HEINRICH – Privacy Release Form

Please provide a detailed outline of your problem and how, specifically, you would like U.S. Senator Martin Heinrich to assist you. If you wish, you may also attach a letter you've written to U.S. Senator Heinrich. Se habla Español.

Please return to: Senator Martin Heinrich 400 Gold Ave. SW Suite 1080 Albuquerque, NM 87121