

**Privacy Release**

I hereby request the assistance of the Office of U.S. Senator Bernard Sanders to address the matter described below. I authorize U.S. Senator Bernard Sanders and his staff to obtain any private and confidential information about me that they might need to provide this assistance.

*Please describe the situation for which you are requesting assistance:*

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SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

Name: (please print) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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

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

Day Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Please provide any other identification numbers relevant to your case, such as account number, Alien Registration number, USCIS Receipt number, State Department Case number, etc.

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**Please Complete and Return To:**  
**U.S. Senator Bernard Sanders**  
**1 Church Street, Third Floor**  
**Burlington, Vermont 05401**  
**Fax: 802-860-6370**  
**Phone: 1-800-339-9834 or 802-862-0697**