DAVID PRICE
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Raleigh, NC 27607
(919) 859-5999

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Durham, NC 27701
(919) 688-3004

CONGRESS OF THE UNITED STATES

HOUSE OF REPRESENTATIVES
WASHINGTON, DC 20515

CONSTITUENT ASSISTANCE FORM

The Federal Privacy Act of 1974 ((Public Law 93-579) and Title 38 > Part V > Chapter 73 > Subchapter III > § 7332 and Title 38 > Part IV > Chapter 57 > Subchapter I > § 5701 prohibits the disclosure of confidential information concerning your affairs without your written authorization. Additionally, the Department of Veterans Affairs requires your authorization to release any information pertaining to past, present, and future VA claims and issues. If you wish for Congressman Price's office to make an inquiry on your behalf, complete the Authorization for Release of Confidential Information form below and return it to:

Congressman David Price
Durham District Office
Mutual Plaza, 411 W. Chapel Hill Street
Durham, NC 27701
Phone: (919/688-3004) Fax: (919/688-0940)

I_____hereby authorize Congressman David Price to obtain confidential information from _____ concerning myself/ ourselves involving the matter outlined below.
(Government agency/office)

Signature_____Date_____

Briefly describe your concern. Please use the back of this form or attach any additional information.

_____
_____
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_____

******PLEASE PRINT******

Name_____Date of Birth_____

Address_____Zip Code_____

Phone (H)_____(W)_____Social Security_____

Military ID_____Alien Registration _____