Privacy Act Waiver/Authorized Release of Information

Congressional Assistance Requested

Office of United States Congressman Seth M. Magaziner

As required by Public Law 93-579, the Privacy Act, I hereby request and authorize Congressman Magaziner to intercede on my behalf, including the right to review all appropriate documentation

that he or his staff deems necessary in connection with the application for assistance or any other action I have pending with the agency named below. I understand that any documents I provide to Congressman Magaziner or his staff may be copied and forwarded to officials of the agency listed below for review. hereby authorize the Office of Congressman Seth M. Magaziner to act on my/our behalf with the **INTERNAL REVENUE SERVICE**, and therefore, waive all rights in the release of any and all information pertaining to the years and taxes listed below. I/we also understand that this inquiry may not conclude in my/our best interest. I/we sign this waiver in good conscience and without mental reservation. Date Signature Signature Date Social Security Number Years/Periods Social Security Number Years/Periods Type of Tax Federal Tax Form (i.e. 1040, 1120, 941) For Office Use: CASE NUMBER For Office Use: STAFF Mailing Address: Telephone: (home) ______ (cell) _____ Email Address: