



# James P. McGovern

Second Congressional District of Massachusetts

## CONGRESSMAN JIM MCGOVERN'S RELEASE OF INFORMATION

The Privacy Act of 1974, Title 5, U.S. Code Section 552a, provides that as of September 27, 1975, disclosure of information of a personal or confidential nature of an individual will no longer be released to third parties without written consent of the individual concerned. Therefore, I hereby grant the Office of Congressman Jim McGovern my written permission to intercede on my behalf. I also duly authorize that any information which is contained in my records and necessary to provide a substantive response may be disclosed to Congressman McGovern's Office.

First: \_\_\_\_\_ Last: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

**PLEASE ATTACH A SHORT LETTER REGARDING THE NATURE OF YOUR REQUEST, PROBLEM OR CONCERN. PLEASE ALSO ATTACH COPIES OF ANY RELEVANT DOCUMENTS OR NOTICES.**

I, the undersigned, acknowledge that I am requesting personal assistance from Congressman James P. McGovern and have not signed this form on behalf of another individual. I further acknowledge that all the information I have provided is true and accurate to the best of my knowledge. I authorize Congressman James P. McGovern and his staff to obtain my personal records, files and information relating to my request for assistance. I understand that I may revoke this authorization at any time:

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE RETURN THIS SIGNED FORM AND ALL SUPPORTING MATERIAL TO:**

**Congressman Jim McGovern**  
**24 Church Street, Room 29**  
**Leominster, MA 01453**  
**Phone: 978-466-3552**  
**Fax: 978-466-3973**

**Congressman Jim McGovern**  
**12 East Worcester Street, Suite 1**  
**Worcester, MA 01604**  
**Phone: 508-831-7356**  
**FAX: 508-754-0982**

**Congressman Jim McGovern**  
**94 Pleasant Street**  
**Northampton, MA 01060**  
**Phone: 413-341-8700**  
**Fax: 413-584-1216**