



U.S. Congressman David Kustoff (TN-08)



PRIVACY RELEASE

Petitioner/Applicant:

Name: _____ Date of Birth: _____

Alien number (if any): _____ Country of Birth: _____

Beneficiary:

Name: _____ Date of Birth: _____

Alien number (if any): _____ Country of Birth: _____

USCIS receipt number or tracking number (no Social Security numbers): _____

Date of filing: _____

Place of filing: _____

Form type(s) – check all that apply:

☐ G-639 ☐ I-90 ☐ I-129 ☐ I-129F ☐ I-130 ☐ I-131 ☐ I-140 ☐ I-212 ☐ I-290B ☐ I-360 ☐ I-485

☐ I-526 ☐ I-539 ☐ I-589 ☐ I-590 ☐ I-600A ☐ I-600 ☐ I-601 ☐ I-612 ☐ I-690 ☐ I-730 ☐ I-751

☐ I-765 ☐ I-821 ☐ I-824 ☐ I-829 ☐ I-914 (Supplement A, B, or C)

☐ I-918 ☐ I-924 ☐ I-929 ☐ N-400 ☐ N-600 ☐ N-656 ☐ N-565 ☐ N-644 ☐ Other: _____

Brief description of the issue (if you need any space, attach a separate sheet):

Staff Member (print): _____ Phone: _____

E-mail: _____

Section below to be completed by the person who is the subject of the records:

I certify, under penalty of perjury, that 1) I provided or authorized all of the information in this privacy release and any document submitted with it; 2) I reviewed and understand all of the information contained in my privacy release submitted with it; and 3) all of this information is complete, true, and correct.

I, (print your name) _____, authorize USCIS to release information contained in my USCIS records as relevant to checking my case status, and to the extent permitted by law, to Congressman David Kustoff and/or the Member's staff.

Signature (sign in ink): _____ Date: _____

Address: _____

Telephone: _____ E-mail: _____

Please return to the following office:

117 North Liberty Street
Jackson, TN 38301
Phone: 731-423-4848
Fax: 731-427-1537