

KATHY CASTOR  
14TH DISTRICT, FLORIDA

COMMITTEE ON  
ENERGY AND COMMERCE  
VICE RANKING MEMBER  
SUBCOMMITTEE ON HEALTH  
SUBCOMMITTEE ON  
ENERGY AND POWER  
SUBCOMMITTEE ON  
OVERSIGHT AND INVESTIGATIONS



**Congress of the United States**  
**House of Representatives**  
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**IMMIGRATION PRIVACY RELEASE FORM**

The Privacy Act of 1974 states that disclosures of a personal or confidential nature will no longer be permitted to third parties without the express written consent of the individual. In order for U.S. Representative Kathy Castor (or her staff) to act on your behalf, please complete and sign the following statement.

**INFORMATION MUST BE IN ENGLISH, ALL FOREIGN DOCUMENTS MUST BE TRANSLATED INTO ENGLISH**

<b>Date:</b>	<b>D.O.B./Fecha de Nacimiento:</b>				<b>Country/País de Nacimiento:</b>
<b>PETITIONER / PETICIONARIO:</b>	Mr.	Mrs.	Ms.	Other/Otro:	<b>Name/Nombre:</b>
	Sr.	Sra.	Srta.		
<b>PETITIONER / PETICIONARIO CONTACT INFORMATION</b>					
Physical:			City:		State: Zip Code:
Mailing:			City:		State: Zip Code:
Home:		Cell:			Work:
Email:					
<b>COMPLETE SECTIONS THAT APPLY TO YOUR CASE</b>					
I. IMMIGRATION/RELATED ISSUES WITH THE FOLLOWING AGENCIES (mark with an "X")					
Department of Homeland Security (DHS)			Department of Justice (DOJ)		
Department of State (DOS)			U.S. Embassy/Consulate Location:		
<b>Attach copy of:</b> <b>Notices of Action (I-797), Proof of U.S. Certificate of Naturalization/Citizenship Certificate,</b> <b>Copy of LPR (Green Card), Letters, Decisions, other pertinent Documents.</b> <b>PHOTO ID FOR PETITIONER AND COPY OF PASSPORT OR NATIONAL PHOTO ID OF THE BENEFICIARY</b>					
Type of application filed (mark with an "X):				<b>Receipt No.:</b>	
I-765/Employment Authorization/Work Permit			I-730/Refugee/Asylee Relative Petition		
I-485/Permanent Residence (Green Card)			N-600 / Certificate of Citizenship		
N-400/Naturalization/Citizenship			I-131/Travel Document		
I-130/Visa for Relative			Other:		
<b>BENEFICIARY / BENEFICIARIO INFORMATION:</b>					
<b>Name/Nombre:</b>					
Address/Dirección:			Phone/ Teléfono:		
<b>D.O.B./Fecha de Nacimiento:</b>			<b>Country/País de Nacimiento:</b>		

