



Office of Congresswoman Katie Porter



U.S. CITIZENSHIP AND IMMIGRATION SERVICES
OFFICE OF LEGISLATIVE AND INTERGOVERNMENTAL AFFAIRS

Privacy Release Form

Member of Congress: Katie Porter

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:

Form type(s) - check all that apply:

- Form type checkboxes: 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-565, N-644, Other:

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

Staff Member (print): Katrina Mañalac Phone: 949-668-6600

Email: casework.katieporter@mail.house.gov

**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 and 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 Senator/Representative Katie Porter and the Member's staff.

Signature (sign in ink): \_\_\_\_\_ Date: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_