

Congress of the United States

House of Representatives

Juan Vargas CA-52

CASEWORK AND PRIVACY AUTHORIZATION FORM

Petitione	r/Applican	t:							
Name:				Address:					_
Date of Birth:				Country of Birth:					
Alien num	nber (if any	·):							
Beneficia	ry:								
Name:				Date	of Birth: _				
Alien number (if any):				Country of Birth:					
USCIS rec	eipt numb	er or track	ing number	(no Social	Security n	umbers):			
Date of fi	ling:								
Place of f	iling:			-					
Form type	e(s) – chec	k all that a	pply:						
□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-600 <i>i</i>	A □I-600	□I-601	□I-612	□I-690
□I-730	□I-751	□I-765	□I-821	□I-824	□I-829	□I-914	(Suppler	ment A, B,	or C)
□ I-918	□ I-924	□ I-929	□ N-400	□ N-56	5 □ N-6	544 □ C	Other:		_

Brief description of the issue (if you need more space, attach a separate sheet):							
Chaff Manubay (print)		Choff Dhamar					
Starr Member (print):		Staff Phone:					
Staff Email:							
Section below to be complet	ed by the person who is	s the subject of the records:					
release and any document su	ibmitted with it; 2) I revi	or authorized all of the information in this privacy iewed and understand all of the information it; and 3) all of this information is complete, true,					
	USCIS records as relevan	, authorize USCIS to release nt to checking my case status, and to the extent se Member's staff.					
Signature (sign in ink):		Date:					
Address:							
Phone:	Fmail:						