

Congressman Charlie Crist
Florida's 13th District
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The Privacy Act of 1974 (Public Law 93-579) prohibits federal agencies from disclosing any records without your written consent. Please sign and submit this form by mail or fax. If you are inquiring on someone else's behalf, that person **must** sign this form.

Full Name: _____

Phone: _____ - _____ - _____ E-mail: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Social Security Number: _____

Identification Numbers: VA Claim # Alien Registration # Visa Case #

USCIS Receipt # Visa Appointment # Military ID # Other (specify)

Check here to receive monthly e-newsletters from Congressman Charlie Crist.

In accordance with the Privacy Act, I hereby authorize Congressman Charlie Crist and his staff to inquiry on my behalf with federal agencies. I also authorize that agency to transmit any available records regarding this inquiry to the office of Congressman Crist.

Signature: _____ Date: _____

Describe your problem below. Please include **copies** of additional documentation.
