



**U.S. Representative Mike Rogers  
3<sup>rd</sup> District Alabama  
Privacy Release Form for Military Casework**

*Please print or type:*

Full Name: (last) \_\_\_\_\_ (first) \_\_\_\_\_ (MI) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Rank: \_\_\_\_\_ Branch of Service: \_\_\_\_\_

Base of Assignment: \_\_\_\_\_

Military Unit Address: \_\_\_\_\_

CO's Name: \_\_\_\_\_ CO's Phone: \_\_\_\_\_

Reason for Requesting Assistance: (Use reverse side if necessary. Attach copies of any letters, documents, etc., that you feel will be helpful in resolving your problem.):

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**Pursuant to the Privacy Act of 1974, I authorized the Department of \_\_\_\_\_ to release personal information to Congressman Mike Rogers and/or his staff in order for him to assist me with the above matter.**

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**If you live in:** Calhoun, Cherokee, Clay, Cleburne, St. Clair, or Talladega County

**If you live in:** Chambers, Lee, Macon, Montgomery, Randolph, Russell, or Tallapoosa County

**Mail or Fax to:**  
 Congressman Mike Rogers  
 1129 Noble Street, Room 104  
 Anniston, AL 36201  
 Fax: (256) 237-9203

**Mail or Fax to:**  
 Congressman Mike Rogers  
 701 Avenue A, Suite 300  
 Opelika, AL 36801  
 Fax: (334) 742-0109