



U.S. REPRESENTATIVE MARK DESAULNIER

Constituent Service Request Form

Immigration Only

Name: _____
Last Name First Name Middle Name
Address: _____ City: _____ State: _____ Zip Code: _____
Phone Number (day): _____ (mobile): _____ (evening): _____
E-mail: _____

*Please include the following information **only** if it pertains to your inquiry:*

Date of Birth: _____ Country of Birth: _____ Alien Registration#: _____
Petitioner: _____ Beneficiary: _____
USCIS Receipt#: _____ Form#: _____
Date File: _____ Priority Date: _____
NVC Case Number: _____ U.S. Embassy/ Consulate: _____

Please state your request for assistance*: _____

***Please attach copies of any supporting documentation, receipt notices, or additional pages if needed to explain explanation of your request.**

Disclosure Authorization (as required by USCIS)

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 to the best of my knowledge.

I 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 Representative Mark DeSaulnier and the Member's staff.

If applicable, I acknowledge that by signing this release I am knowingly waiving my confidentiality protection under §1367. I permit Representative Mark DeSaulnier and his staff to be the new custodian of this information.

Signature (Sign in Ink): _____ **Date:** _____

Please return this completed form to either:

Walnut Creek District Office
3100 Oak Road, Suite 110
Walnut Creek, CA 94597
Phone: (925) 933-2660
Fax: (925) 933-2677

Antioch District Office
4703 Lone Tree Way
Antioch, CA 94531
Phone: (925) 754-0716
Fax: (925) 754-0728