



Congressman Barry Loudermilk

11th District of Georgia

Privacy Release Form for EIP Inquiry

Personal Information:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home#: _____ Cell #: _____

Email: _____

Please complete the information below that pertains to your inquiry request.

Social Security Number: _____

Date of Birth: _____

Do you receive direct deposit from Social Security, Railroad Retirement or the VA? _____ Yes _____ No

Are you a current tax filer: _____ Yes _____ No

If yes, what is your filing status: _____ Single _____ Married/Jointly

_____ Married/Separately _____ Head of Household

_____ Qualifying Widow(er) w/ Dependent Child

If you are a current tax filer did you file the following years? _____ 2018 _____ 2019

Has your 2019 tax filing been processed? _____ Yes _____ No

Did you divorce/legally separate in 2019? _____ Yes _____ No

Were you claimed as a dependent in 2018? _____ Yes _____ No

In accordance with the provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), I hereby give my consent for information concerning my file to be furnished to my U.S. Representative Barry Loudermilk. I authorize U.S. Representative Loudermilk to receive all pertinent information and to make an inquiry regarding the above described issue.

Signature: _____ Date: _____

Return this form by email, fax or mail to: caseworkga11@mail.house.gov Fax: (770) 517-7427

Mail: 9898 Highway 92, Suite 100, Woodstock, GA 30188, Phone: (770) 429-1776