Congress of the United States

House of Representatives Washington, **DC** 20515—0402

Privacy Release Form

The Honorable French Hill:

I hereby authorize you or your staff to contact the Internal Revenue Service (IRS) Taxpayer Advocate Service in reference to my inquiry and request information on my behalf. The IRS Taxpayer Advocate Service is authorized to contact other offices within the IRS, and to furnish you or your staff with copies of any documents or verbally discuss any matters relative to my inquiry. I am aware that the Privacy Act of 1974 prohibits the release of information without my written authorization. I understand this form does not constitute a Power of Attorney.

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Name:	Social Security #:
Address:	Date of Birth:
City/State/Zip:	Home or Cell:
Work:	Type of Tax (income, excise, etc.):
Tax years/periods:	Tax Form(s):
If the Inquiry relates to a business, please pr	ovide the following information as well:
Company Name	Your Relationship to the business
	WHICH YOU ARE REQUESTING CONGRESSMAN HILL'S
BRIEFLY DESCRIBE THE ISSUE FOR ASSISTANCE: (If additional space is need attach any relevant documentation.)	WHICH YOU ARE REQUESTING CONGRESSMAN HILL'S ded please feel free to write on the back or use additional paper. Also, please
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