



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

*Please print or type:*

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

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

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

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

Social Security #: \_\_\_\_\_ CSA or CSF #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Separation Date: \_\_\_\_\_ Date of Death (if applicable): \_\_\_\_\_

Place "x" in box indicating what retirement system you are under.

- Civil Service       Civil Service Offset       FERS, Federal Employees Retirement

Place "x" in box indicating type of problem.

- Disability Claim       Retirement Claim       Payment Problem       Report of Death

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.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Pursuant to the Privacy Act of 1974, I authorized the Office of Personnel Management 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: \_\_\_\_/\_\_\_\_/\_\_\_\_

<b>If you live in:</b> Calhoun, Cherokee, Clay, Cleburne, Randolph, or Talladega County	<b>If you live in:</b> Chambers, Lee, Russell, or Tallapoosa County	<b>If you live in:</b> Coosa, Macon or Montgomery County
<b>Mail to:</b> Congressman Mike Rogers 1129 Noble Street, Room 104 Anniston, AL 36201	<b>Mail to:</b> Congressman Mike Rogers 1819 Pepperell Parkway, Ste 203 Opelika, AL 36801	<b>Mail to:</b> Congressman Mike Rogers 7550 Halcyon Summit Drive Montgomery, AL 36117