

**OFFICE OF CONGRESSWOMAN ANNA G. ESHOO
PRIVACY CONSENT FORM**

Internal Revenue Service

Please print clearly

Date: _____ / _____ / _____

Name: (Last) _____,

(First) _____

Address: _____

Phone: (Daytime): _____ (Evening) _____

E-mail: _____

Federal Agency Involved: ___ Internal Revenue Service (IRS) _____

Regarding Tax Year(s): _____

Primary Taxpayer Social Security Number (SSN): _____

Name of Spouse (if applicable): _____

SSN of Spouse (if applicable): _____

Is the latest notice from the IRS attached? _____ yes _____ no

- Please describe the nature and date of your latest correspondence or contact with the agency:

- Please briefly explain the problem you are having with the IRS:

- Have you previously contacted this or any other representative's office regarding this matter? Taxpayer Advocate Service? If so, when?

In accordance with the provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), I hereby authorize Congresswoman Anna Eshoo and her staff to make inquiries on my behalf and to receive confidential information in their efforts to assist me in resolving a federal agency matter in resolving a federal matter.

Signature

Printed Name

Today's Date

Please Return to:

698 Emerson Street
Palo Alto, California 94301
650-323-2984 (phone)
650-323-3498 (fax)