



Request for Assistance

SENATOR SHERROD BROWN

NAME _____ HOME PHONE (____) _____

ADDRESS _____ CELL PHONE (____) _____

CITY _____ WORK PHONE (____) _____

STATE _____ ZIP _____ COUNTY _____ EMAIL _____

SS# _____ Medicare# _____ CLAIM#/CASE# _____
(Provide these numbers only if necessary to investigate your case.)

Dear Senator Brown:

I am seeking your assistance in a personal matter involving the federal government. I hereby authorize your office to request, on my behalf, that the appropriate federal agency or agencies investigate the following:
(Use reverse side or additional paper, as needed.)

I further authorize, under the provisions of the Privacy Act of 1974, that the agency or agencies involved have my permission to disclose information from their records about my case or claim to the office of Senator Sherrod Brown.

SIGNATURE _____ DATE _____

Please return this completed form and any other relevant information to:
Mail: Senator Sherrod Brown, 801 West Superior Avenue, Suite 1400, Cleveland, OH 44113
Fax: 216-522-2239 **Email: casework@brown.senate.gov**

If you have questions call: **Phone: 216-522-7272** **Toll-Free Number: 888-896-6446 (Press 1)**

Office of U.S. Senator Sherrod Brown
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In addition to the Request for Assistance form, please complete this form. If possible, please type or print your responses. Please be sure to sign both forms and, if appropriate, provide a beneficiary signature. Your completed forms, along with copies of any recent correspondence from the National Visa Center, USCIS or the Consular Office, should be returned to Senator Brown's Cleveland office by mail, fax or email: casework@brown.senate.gov.

If you are requesting assistance with a non-immigrant visa, please include the applicant's name, passport number, birthdate and a letter of introduction with a detailed explanation of the invited guest's return to country of origin and any other supporting documentation or evidence.

If you are a legal representative, you must attach a copy of Form G-28.

Name of the Petitioner: _____

Alien Registration Number (Green Card): A# _____

Name of Beneficiary: _____

Date of Birth (MM/DD/YY): _____

Alien Registration number (Green Card): A# _____

Petition Receipt Number (usually begins with "WAC"): _____

Passport Number: _____

Administrative processing* _____

Previous Denials: _____

I further authorize, under the provisions of the Privacy Act of 1974, that the agency or agencies involved have my permission to disclose information from their records about my case or claim to the office of Senator Sherrod Brown.

SIGNATURE(S)

Petitioner's Signature: _____ Date _____

Beneficiary's Signature: _____ Date _____

**From the U.S. Department of State website: Some visa applications require further administrative processing, which takes additional time after the visa applicant's interview by a consular officer. Applicants are advised of this requirement when they apply. Most administrative processing is resolved within 60 days of the visa interview. When administrative processing is required, the timing will vary based on individual circumstances of each case. Visa applicants are reminded to apply early for their visa, well in advance of the anticipated travel date.*