

Congresswoman Eleanor Holmes Norton Request for Federal Tax Assistance.

Provide Your Full Name, Residence Address, and Contact Information in the District of Columbia

irst Name	Middle Name	Last Na
	D.C. Residential Address Including Street, Quadrant, and Apartme	nt or Unit
Zip Code	Phone	E-Mail
Please provide the informa	tion to identify and to locate your file v	with the Internal Revenue Service:
Social Security Number	Tax Forms Involved	Tax Year(s)
Taxpayer Identification Number (If Applicable)	If inquiry involves a business, plea	se provide this information:
	Business Name	Employer Identification Number
our Title or Relationship with the Business	Tax Type (Income, Employment, etc.	Business Tax Year(s) or Period(s)
Business Tax Forms Involved	Briefly explain the problem below:	

Simply state the result you want below:

Feel free to attach additional pages and copies of relevant documents. Recent IRS notices are helpful.

If you do not receive your mail at your residence, Please provide your alternative address:

- Pursuant to the Privacy Act of 1974, 5 U.S.C. § 552a, I authorize the Internal Revenue Service (IRS) to release such information necessary and relevant to respond to the matter stated in this request to Congresswoman Eleanor Holmes Norton and to her staff.
- I authorize the IRS furnish Congresswoman Norton and her staff with copies of relevant documents, and to discuss any matter related to my inquiry.
- I understand the Privacy Act of 1974 and the Internal Revenue Code § 6103, 26 U.S.C. § 6103, prohibit the release of information without my written authorization.
- I understand this form does not constitute a Power of Attorney.

Voice: 202-408-9041

• I authorize Congresswoman Eleanor Holmes Norton and to her Staff to request and to access to all records and reports relevant to this request for assistance.

Signature in Ink

Date Signed (MM/DD/YYYY

FAX: 202-408-9048

Sign, scan, and e-mail your request to: Norton.Casework@Mail.House.Gov or mail it to: