

Certification for Requests for Information
Under the Privacy Act of 1974

To be completed by the requester:

I, _____ (Printed name), do hereby certify that I am the individual about whom the record requested in this letter pertains or that I am within the class of persons authorized to act on his behalf in accordance with 5 U.S.C. 552a(h).

Signature

Date

To be completed by the notary public:

In the County of _____, State of _____. On this ___ day of _____ (Month), _____ (Name of individual) who is personally known to me, did appear before me and sign the above certificate.

Signature

Date

My Commission expires _____