

## **AUTHORIZATION TO RELEASE INFORMATION**

In accordance with the Privacy Act of 1974 (5 U.S.C. 552a, Public Law 93-579), I,  
\_\_\_\_\_, hereby request and give  
my consent to the U.S. Department of State, Bureau of the Comptroller and Global  
Financial Services to release the information described below to:

Name \_\_\_\_\_

Address \_\_\_\_\_

I understand that by signing this document, I authorize the release of all information  
related to my indebtedness to the U.S Department of State.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_