

NATIONAL VETERANS LEGAL SERVICES PROGRAM

PRIVACY ACT WAIVER

In order to waive my rights under the Privacy Act, 5 U.S.C. 552a(b), and under any other federal or state law or regulation which controls access to my records, I give my prior written consent to the U.S. Department of Veterans Affairs (VA) to disclose fully and promptly to National Veterans Legal Services Program employees **Tierra Robinson-Morgan, Daniella Furey, Vidya Singh**, and/or attorneys **Ronald B. Abrams, Katy Clemens, Christine Cote, Jill Davenport, Amy Odom, Ray Kim, Thomas A. Moore, Richard V. Spataro, David Sonenshine, Patrick Berkshire, Tiffany Kelley, Sandhya Kidd, Jeanne Schlegel, Michael Spinnicchia, and Barton F. Stichman**, and any agents, attorneys, legal interns or law clerks working under their supervision or any other person or law firm designated by any of the attorneys named above, any and all records, documents, or files that pertain to me which they may request.

If these records include information protected under 38 U.S.C. § 7332 about drug abuse, infection with human immunodeficiency virus (HIV), alcoholism or alcohol abuse or sickle cell anemia, I specifically consent to that disclosure as well.

Name: _____
(Last, First, Middle Initial)

Date of Birth: _____ Last 4 Digits of Social Security #: _____
(YYYYMMDD)

VA Claims File #(if known): _____

Address: _____
(Street, City, State and Zip Code)

Signature: _____ Today's Date: _____
(Please provide a handwritten signature above)