U.S. Senator John Cornyn

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PASSPORT INTAKE FORM

I hereby authorize Senator John Cornyn to request on my behalf, pertinent to the Freedom of Information and Privacy Act, access to information concerning me in the files of the U.S. Department of State. I am furnishing his office with the following information to aid in the inquiry.

Name (as it appears on the application):

Date of Birth:

Social Security Number:

Application Locator Number:

(If a passport application has been entered into the system the locator number may be checked online at http://travel.state.gov)

Mailing address:

E-mail address:

Daytime Telephone Number:

Date Application was submitted:

Paid for: Routine Service: ☐ Expedited Service: ☐

IF APPLICABLE:

Travel destination:

Date of Departure**:**

FedEx or USPS Tracking Number**:**

SIGNATURE:_____ DATE:_____

Revised 3/10/10