



Douglas A. Ducey
Governor

State of Arizona
Office of the Governor
1700 West Washington, Phoenix, AZ 85007

Main Phone: 602-542-4331
Facsimile: 602-542-1381

CONSTITUENT ASSISTANCE FORM

Thank you for contacting the Office of Governor Doug Ducey for assistance. In order to fully assist you with your request, I need to provide the applicable Arizona department, agency, board or commission with a signed consent form to obtain information on your behalf. Please complete the information and authorization below and return it to the Governor's Office of Constituent Services as soon as possible. The signed consent form must be signed by the individual whose matter is before the department, agency, board or commission, or his/her legal guardian or power of attorney. Should you have any questions, please contact my office at 602-542-4331.

AUTHORIZATION

I hereby grant Governor Doug Ducey and members of his staff the authority to obtain from the applicable Arizona department, agency, board or commission all information necessary to complete my inquiry. I request that any Arizona department, agency, board or commission with information relevant to my inquiry discuss with and release that information to the Governor's Office of Constituent Services. This authorization is revocable upon receipt of my written notification by the Governor's Office of Constituent Services or otherwise will remain in effect for one year from the date of my signature below.

Please also attach a 1 page typed response detailing your situation.

Full Name (Please Print)		Last Four of SSN# (optional)	Date of Birth (optional)
Street Address	Apt. #	City	Zip Code
Home Phone	Work Phone	Email	
Department/Agency/Board/Commission			Case/Claim Number (if applicable)

I affirm that by my signature below, I am attesting to the truth of all of the above.

Signature	Current Date
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