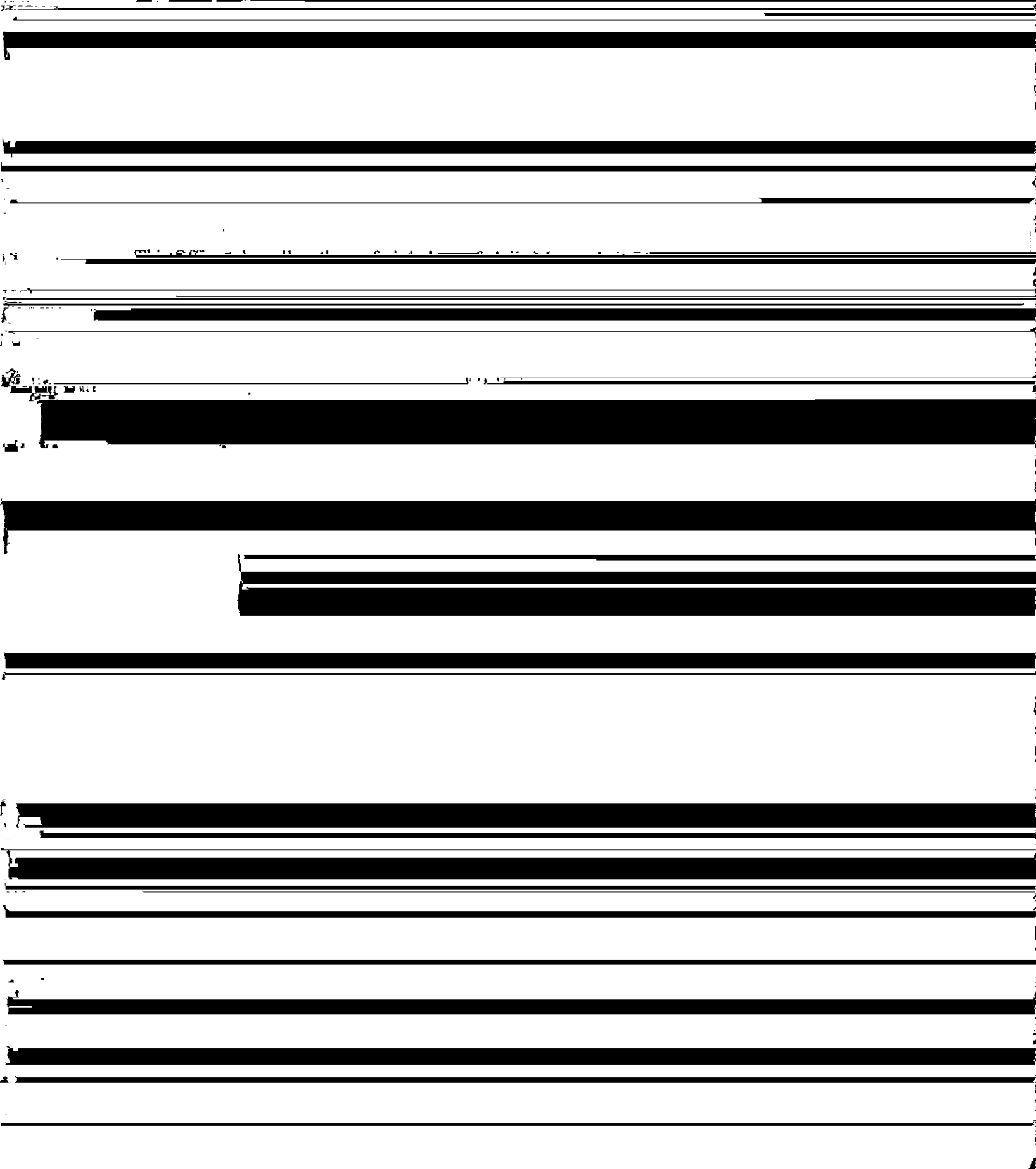


however, once we have their consent, we will provide you with more specific details concerning



U.S. Department of Homeland Security



**Homeland
Security**

Encl.



Homeland Security

I. Your Travel Experience

Thank you for contacting the Department of Homeland Security Traveler Redress Inquiry Program (TRIP).



Homeland

2.4.2017

IV. Additional Information (if applicable)

Date of Entry into U.S.:(mm/dd/yyyy)		Name of Airline or Ship:	
Port of Entry into U.S.:		Flight or Cruise Number:	
Departure Date from U.S.:		Other Names Used:	

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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Homeland Security

**DHS Traveler Redress
Inquiry Program**
(DHS TRIP)

Authorization to Release
Information to Another Person

Authorization to Release Information to Another Person

Please complete this form to authorize DHS to disclose your personal information to another person.

My Information

You are asked to provide your information only to facilitate the identification and processing of your redress request. Without your information DHS may be unable to process your third party authorization request.

Name

Address

Pursuant to the Privacy Act of 1974 (5 U.S.C. § 552a(b)), I authorize the U.S. Department of Homeland Security to release any and all information relating to my request.