

CORPORATE GOVERNMENT EMPLOYEE QUESTIONNAIRE

For all employees of federal, state, county, municipal and township corporations.

Public Law 93-549 states in part: "The purpose of this Act to provide certain safeguards for an individual against invasion of personal privacy by requiring government agencies . . . to permit an individual to determine what records (documents) pertaining to him (or her) are collected, maintained, used, or disseminated by such agencies."

The following questions are based upon that act, government prohibitions regarding identity theft and recognition of the commercial statutes that define your employment. .

Please fill out the form completely.

My identification per your records

1. My name as it appears in your files

2. My address as it appears in your files

City _____ State _____

3. My legal status as listed in your files

Government-corporation employee information

4. Full Legal Name:

5. Residence Address

CITY _____ STATE _____ ZIP _____

6. Badge or employee ID#

7. Employee job title

8. Employee phone number

9. Name of corporation that employs you (please use the legal all caps name as listed on Dun and Bradstreet)

10. Name of department, bureau or agency of that corporation that employs you

11. Name of supervisor _____

12. Supervisor's mailing address:

CITY _____ STATE _____ ZIP _____

13. Supervisor's phone number

14. Name of department head _____

15. Department head's mailing address if different from supervisor's

CITY _____ STATE _____ ZIP _____

16. Department head's phone number

Statutory identification

17. Name and number of the corporate statute (rule or regulation) that generated this encounter:

18. Are you aware of a document (with my original signature) that obligates me to adhere to this corporate statute of your employer?

Yes

No

19. The name of this document:

20. Under penalty of perjury, please attest by signing below that you have personally seen this document and can attest to its validity?

_____ Date _____