

(Print on Applicant's personal Stationary)

**AUTHORIZATION TO RELEASE INFORMATION  
ABOUT STATUS OF AN ALIEN**

ATTACHMENT to INS Form G-845, "Document Verification Request"

NAME: \_\_\_\_\_  
(Last, First, Middle)

ADDRESS: \_\_\_\_\_  
(Complete Address, including zip code)

\_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
(Month, Day, Year)

PLACE OF BIRTH: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

REGISTRATION NUMBER: \_\_\_\_\_  
(Provide a clear copy of the front and back of your Alien Registration Card)

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I authorize the U. S. Citizenship and Immigration Services to release alien verification information about me to Greater Texas Capital Corporation, 3600 Old Bullard Road, Suite 403, Tyler, TX 75701 because I am applying for a U. S. Small Business Administration Loan.

\_\_\_\_\_  
Signature (blue ink)

\_\_\_\_\_  
Date