

CONSENT TO DISCLOSURE PURSUANT  
TO 5 U.S.C. SECTION 552a.(b)

Name of Case:  
Name of Claimant:  
OWCP File No.:

Pursuant to subsection (b) of the Privacy Act of 1974 (5 U.S.C § 552a.(b)) and with respect to the referenced matter, I, Omar Menchaca, hereby authorize the Office of Workers' Compensation Programs, Employment Standards Administration, United States Department of Labor, to release to Unisource Discovery, photocopies of those documents from my individual record maintained in San Francisco, CA. I declare under penalty of perjury that the foregoing is true and correct.

DATED: \_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Current Address of Claimant

ACKNOWLEDGEMENT

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) ss.

On this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_, before the undersigned Notary Public for the State of \_\_\_\_\_ personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and acknowledge that \_\_\_he executed the same.

\_\_\_\_\_  
Notary Public

Notary Seal