

Sierra Vista Police Department

911 North Coronado Drive
Sierra Vista, Arizona 85635
Phone: (520) 452-7500

AUTHORIZATION FOR RELEASE OF INFORMATION

Name: _____

Date of Birth: _____

Social Security Number: _____ - _____ - _____

I do hereby authorize release of any and all information that you may have concerning me, including information of a confidential nature. I do hereby release from any and all liability, all persons or entities disclosing information pursuant to this release.

In witness whereof, I have executed this request at _____ ,
on the _____ day of _____ , 20 _____.

(Applicant's Signature)

STATE of Arizona

SS.

COUNTY of Cochise

Subscribed and sworn to before me this _____ day of _____, 20 _____.

Notary Public

My Commission Expires _____