



JAMES W. MURPHY
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AUTHORITY FOR RELEASE OF INFORMATION

I REQUEST AND AUTHORIZE YOU TO FURNISH TO THE SHERIFF'S DEPARTMENT, CITY OF ST. LOUIS, ANY AND ALL INFORMATION THAT YOU MAY HAVE CONCERNING ME, INCLUDING, BUT NOT LIMITED TO, MY SCHOOL RECORD OR TRANSCRIPT, AND POLICE RECORD.

PLEASE INCLUDE ANY AND ALL INFORMATION OF A CONFIDENTIAL OR PRIVILEGED NATURE IF IT IS REQUESTED. THIS INFORMATION IS TO BE USED TO ASSIST THIS DEPARTMENT IN DETERMINING MY QUALIFICATIONS FOR THE POSITION I AM SEEKING.

I HEREBY RELEASE YOU, YOUR ORGANIZATION OR OTHERS FROM ANY LIABILITY OR DAMAGE WHICH MAY RESULT FROM FURNISHING THE INFORMATION REQUESTED.

SIGNATURE

ADDRESS

DATE

PURSANT: ST. LOUIS CITY REVISED CODE 3.02.060 THERE WILL BE A \$20.00 SERVICE FEE FOR ALL RETURNED CHECKS.