

Walnut Street Fire Company # 4

Request For Release Of Records

To : _____ Madison Police Dept. _____ Jefferson County Sheriff's Dept.

Other _____

The Requestor listed on this form has applied for membership in Walnut Street Fire Company # 4 and, by affixing his / her signature to this request, does hereby authorize your agency to provide information about any of his / her arrests or citations (exclusive of traffic citations) to Walnut Street Fire Company # 4. This information is for an exclusive purpose and will not be provided to any other person or agency without the express permission of the Requestor.

Other names used by the requestor including maiden name, surname, nicknames or aliases :

Printed name of Requester _____

Signature Of Requester _____

Date _____

_____ Requested Information On Reverse _____ No Records Found

Released by _____ Date _____

For Agency