AUTHORIZATION FOR THE RELEASE OF INFORMATION

The undersigned hereby author (please print clearly)	rizes Trak-1 Technology to release info	ormation from the records of:
FIRST NAME	MIDDLE NAME	LAST NAME
List any former names used (e.	g. birth last name, nicknames, etc.):	
STREET ADDRESS		
CITY, STATE, ZIP		
SOCIAL SECURITY NUMBER	BIRTHDATE	
DRIVERS LICENSE NUMBER	STATE OF ISSUANCE	
Information to be released to: Annual Conference of the Unite	Authorized persons in the Office of Methodist Church.	linisterial Services of the Kentucky
	iminal background check information, y, government watch lists and driver li	
-	on is being released for the purposes o h Quadrennial Boundaries/Safe Sanctu	•
below; and, the records obtained	rization for release will expire one (1) ed pursuant to this release will be kep The Book of Discipline of the United Me	t, and may be accessed and copied,
SIGNATURE		
DATE		