



Request for Criminal/Motor Records Check - Sample

I hereby request _____ (agency) to release information which pertains to any record of (check one or both)

- Convictions and/or
- Driving records

contained in its files or in any criminal or motor vehicle file maintained on me whether local, state, or national. I hereby release the said agency from any and all liability resulting from such disclosure.

Name (printed) _____

Signature: _____

Maiden name (if applicable): _____

Print any and all aliases: _____

Date of birth: _____

Place of birth: _____

Social security number: _____

Driver's license number: _____ State issued: _____

Today's date: _____

Record sent to:

Name: _____

Address: _____

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