Authorization for Release of Information

To:	Hampshire County Circuit C	Clerk		
From:	Name (type or print)		Date of Birth	XXX-XX- Last 4 of SS#
	Address			
	radicss			
Clerk respec	for Hampshire County Circ	cuit Court. Upon	presentation of this r	by the Hampshire County Circuit release or copy hereof, I hereby you have concerning my criminal
as part		ease you, your organ	ization or other from a	e,, any liability or damage which may
Given	under my hand this	day of		, 20
		SIGNATURE		
		PRINT NAME		
	E OF WEST VIRGINIA ITY OF			
On this	sday of		_, 20,	
person	ally appeared before me and	acknowledged his/h	er signature to the abov	ve statement.
SEAL		Notary Public		
Му Со	ommission expires			