

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____
NAME (MUST BE **PRINTED-LEGIBLY**) (SOC) (DOB)

PURSUANT TO NMSA 1978, SECTION **29-10-6(A)** (Repl. Pamp. 1990), OF THE NEW MEXICO ARREST RECORD INFORMATION ACT, HEREBY APPOINT:

New Mexico Department of Public Safety
6301 Indian School Road Suite 310
Albuquerque, NM 87110

AS AN AUTHORIZED AGENT FOR ME FOR THE PURPOSE OF INSPECTING (AND /OR OBTAINING COPIES) ANY NEW MEXICO ARREST FINGERPRINT CARD SUPPORTED RECORD INFORMATION MAINTAINED BY THE DEPARTMENT OF PUBLIC SAFETY AND NEW MEXICO LAW ENFORCEMENT AGENCIES, INCLUDING INFORMATION CONCERNING FELONY OR MISDEMEANOR ARRESTS.

TO THE CUSTODIAN OF THE RECORDS IN QUESTION, I HEREBY DIRECT YOU TO RELEASE SUCH INFORMATION TO THE AUTHORIZED AGENT AS DESCRIBED ABOVE.

I HEREBY RELEASE THE CUSTODIAN OR CUSTODIANS OF SUCH RECORDS AND THE DEPARTMENT OF PUBLIC SAFETY, INCLUDING ANY OF THEIR AGENTS, EMPLOYEES, OR REPRESENTATIVES IN ANY CAPACITY, FROM ANY AND ALL CLAIMS OF LIABILITY OR DAMAGE OF WHATEVER KIND OR NATURE, WHICH AT ANY TIME COULD RESULT TO ME, MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE BECAUSE OF COMPLIANCE BY SAID CUSTODIAN OR CUSTODIANS WITH THIS "AUTHORIZATION FOR RELEASE OF INFORMATION" AND MY REQUEST CONTAINED HEREIN FOR THIS RELEASE OR BECAUSE OF ANY USE OF THESE RECORDS. THIS RELEASE IS BINDING, NOW AND IN THE FUTURE, ON MY HEIRS, ASSIGNS, ASSOCIATES, PERSONAL REPRESENTATIVE OR REPRESENTATIVES OF ANY NATURE.

SIGNATURE: _____

DATE: _____

(*ATTN: NOTARY-ENSURE DOCUMENT IS SIGNED IN YOUR PRESENCE AND NAME,DOB,SOC INFO IS VERIFIED WITH A VALID ID)

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20 _____.

(SEAL) _____

(NOTARY PUBLIC)

MY COMMISSION EXPIRES: _____.