## IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR THE COUNTY OF \_\_\_\_\_ Case No. Plaintiff/Petitioner RELEASE OF INFORMATION v. Defendant/Respondent Applicant Name: \_\_\_\_ (Name of person to be represented) First Middle Last I consent to the release of any information requested by the court in this case, regardless of whether the information is protected by federal or state law, as described in the Advice of Rights document. I consent to release information and records to the court's designee. This release is valid for 6 months from the date signed or until the conclusion of my case, whichever is sooner. My Full Name: My Date of Birth: My Social Security Number: My Driver License State and Number: Date Signature Name (printed)

City, State, ZIP

Contact Address

Contact Phone