

**RELEASE OF PERSONAL INFORMATION
UNDER THE
FEDERAL DRIVER'S PRIVACY PROTECTION ACT
18 USC § 2721(b)(13)**

I hereby consent to the release of my personal information to:

NAME: _____

ADDRESS: _____

REPORT NO.: _____

I fully understand that this consent authorizes the GREEN BAY POLICE DEPARTMENT and its employees to fully release all of my personal information and highly restricted personal information under the Driver's Privacy Protection Act to the above-named person or entity.

I also understand that this consent only applies to the release of my own personal information and highly restricted personal information and does not apply to any other person's personal information and highly restricted personal information contained in the released report.

This consent expires on: _____.

SIGNATURE

Subscribed and sworn to before me, a Notary Public,
State of Wisconsin, County of Brown, this ____ day of
_____, 20____.

NOTARY PUBLIC

My Commission Expires: _____