UNITED STATES DISTRICT COURT

MIDDLE DISTRICT OF GEORGIA PROBATION OFFICE

ELLEN S. MOORE CHIEF U.S. PROBATION OFFICER 433 WALNUT STREET MACON, GEORGIA 31201 REPLY TO:

P.O. BOX 1736 MACON, GEORGIA 31202-1736

> PHONE: (478) 752-8106 FAX: (478) 752-8165

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

Name:		Date of Birth:		Race/Sex:
Docket No.:		PACTS #:		Social Security No.:
Other Names incl	luding maiden name:		Mother's Maiden Name:	
Street Address:		City, ST:		Zip Code:
Street Address:		City, 51:		Zip Code:
as required by the U.S. Dist	entation is to serve as my request for information the PRIVACY ACT OF 1974. Having read trict Court, in accordance with Rule 32(d)(2)(a records and information pertaining to me a	the explanation of my A)(ii) and 18 U.S.C. §3	rights, which is attack 3664(d)(3), I hereby a	hed to this form, and having been convicted in
I authorize re	elease to the United States Probation Office al	l confidential records a	and information pertain	ining to me and specifically the following:
	Educational records and information contained in permanent school records pursuant to the provisions of 34 CFR 99.			
	Medical records, both of a physical and psychological/psychiatric nature, including records of alcohol/drug and/or narcotic treatment and treatment and testing for HIV, AIDS, or any related conditions, pursuant to the provisions of 5 U.S.C. §552a, 20 CFR 401 and 42 CFR 2.			
	Employment records including but not limited to dates of employment, salary and compensations, work performance and reasons for termination of employment.			
	Juvenile/Criminal records to include review of criminal files.			
	All government (federal, state and local) information to include military service records, birth/marriage/divorce records, and immigration and naturalization records. I also authorize the Social Security Administration to release all employment earnings and income information related to me as well as any benefit/disability information.			
	Financial records including but not limited to charge accounts, loans, bank accounts, securities, real estate, life insurance, motor vehicles, lines of credit (including credit bureau reports), trusts and any other assets or liabilities in which I have interest.			
APPLICABLE ONLY TO MEDICAL RECORD AUTHORIZATIONS: In accordance with HIPAA, I understand that I may revoke the authorization of medical records at any time except that the revocation will not have any effect on any action taken by the medical facility in reliance on this authorization before written notice of revocation is received. I further understand that I must provid any notice of revocation in writing to the medical facility.				
(I also autho	orize the use of photostatic and tele-faxed copie	es of this release in lie	u of the original.)	
	ent releases all participants from liability in the ffice and shall remain in effect until all transac			
NOTE: The for informa	e U. S. Probation Office is not able to provid tion.	e reimbursement for	photocopies submitt	ted by agencies in response to any requests
	Witness/United States Probation Officer			Date
	Signature of Person Authorizing Disclosure			Date
	Parent/Guardian (if applicable)			Date

STATEMENT OF CUSTOMER RIGHTS UNDER THE RIGHT TO FINANCIAL PRIVACY ACT OF 1978

Federal law protects the privacy of your financial records. Before banks, savings and loan associations, credit unions, credit card issuers, or other financial institutions may give financial information about you to a federal agency, certain procedures must be followed.

Consent to Financial Records

You may be asked to consent to make your financial records available to the government. You may withhold your consent, and your consent is not required as a condition of doing business with any financial institution. If you give your consent, it can be revoked in writing at any time before your records are disclosed and, in any event, is effective for a period of not more than three months. Your financial institution must keep a record of the instances in which it discloses your financial information to the government, and this record will be available to you upon request, unless a court order restricting your right to such record has been obtained by the government.

Without Your Consent

Without your consent, a Federal agency that wants to see your financial records may do so ordinarily only by means of a lawful subpoena, summons, formal written request, or search warrant for that purpose.

Generally, the Federal agency must give you advance notice of its efforts to obtain your records by one of the above means, explaining why the information is being sought and telling you how to object in court to the release of your records.

Exceptions

If the government obtains a search warrant for your records, or if the government convinces the court that there are legitimate reasons to delay giving you notice, the Federal agency will be able to obtain your records without providing you notice beforehand.

In situations where you do not receive advance notice that the government is seeking your financial records, you will be notified once the reason for the delay of notice no longer exists.

Transfer of Information

Generally, a Federal agency which obtains your financial records is prohibited from transferring them to another Federal agency unless it certifies in writing that the transfer is proper and sends a notice to you that your records have been sent to another agency.

Penalties

If the Federal agency or financial institution violates the Right to Financial Privacy Act, you may sue for damages or to seek compliance with the law. If you win, you may be repaid your attorney's fees and costs.