



Colonel Jon M. Belmar Chief of Police 7900 Forsyth Boulevard St. Louis, Missouri 63105 Voice/TTY (314) 889-2341

The St. Louis County Police Department will provide conviction information for another individual when accompanied with this notarized statement signed by the individual named in the record check. Please complete the information below and sign the authorization statement.

Please print					
Name	Race	Sex	Hgt	Wt	
Address City/State/7in	Date of Birth				•
City/State/ZipSocial Security #	Drivers Licens	e #/State			
Social So	Divors Blooms	State			
I hereby authorize the St. Louis County Po I also attest that the above information about	lice Department to rele ut me is accurate and c	ease arrest/c current.	conviction infor	mation concerning	g myself.
I hereby authorize the St. Louis County Po to the following individual:	lice Department to rel	ease arrest/	conviction info	rmation concernin	ig myself
(place name)				•	
This record check is for: (check one)				•	
<ul> <li>St. Louis City and St. Louis County</li> <li>Record challenge (St. Louis County</li> <li>Child care and nursing home employed</li> </ul>	y only)				
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Signature	· · · · · · · · · · · · · · · · · · ·		Date		
2.5			2400		
Print Name	<del></del> -		•		
State of Missouri}			•		
State of Missouri} County of	SS				
I,	, a Notary Public,	do hereby o	certify that on the	he	_ day of
who declares he/she is the individual executing	ersonany appeared ber	ore me			
the statements herein contained are true.					
IN WITNESS WHEREOF, I have hereunto set r	my hand and seal the d	lay and year	r before written	•	
	Nota	ry Public			
	Мус	commission	expires		
114698					

(Rev. 003/14)

