

STATE CAPITOL  
P.O. BOX 942849  
SACRAMENTO, CA 94249-0071  
(916) 319-2071  
FAX (916) 319-2171



## AUTHORIZATION FOR RELEASE OF INFORMATION

I, \_\_\_\_\_ [full name of constituent], have sought assistance from the Office of Assemblymember \_\_\_\_\_ (the "Assemblymember") on a matter that may require the release of information contained in records maintained by \_\_\_\_\_

\_\_\_\_\_ [name of the government agency or department] (the "Agency") and that may be prohibited from dissemination by law. I hereby authorize the Agency to release all relevant portions of my records and to discuss matters relating to those records with the Assemblymember and with any authorized member of the Assemblymember's staff until this matter is resolved. My information is set forth below.

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Telephone: \_\_\_\_\_

Case Number: \_\_\_\_\_

### Personal Constituent Information:

The following should be included with the authorization form only if the government agency or department requires the information in order to discuss and release records relating to the constituent. Do not request this information if it is not necessary. If the information is necessary, advise the constituent that it is completely voluntary to provide, but the agency or department does need the information in order to communicate with the Assemblymember. Only include the lines for both social security and driver's license numbers if both are required by the agency or department.

I have been advised that the Agency that I am authorizing to communicate with the Assemblymember about my records, requires the following information for purposes of that authorization. I acknowledge that I am not required to provide this information to the Assemblymember. If I do provide the information to the Assemblymember, I do so **voluntarily** and for the purpose of the authorization.

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

### Protecting Constituent's Personal Information: (policy remains the same)

Sensitive, personal information like social security and driver's license numbers should not be collected unless necessary. Staff should avoid transmitting sensitive, personal information over e-mail to the extent possible. Staff should protect sensitive, personal information when they have it, including limiting access to the information to only those necessary. It should **not** be stored in your LCMS database. Staff should shred or otherwise securely dispose of sensitive, personal constituent information when it is no longer needed for the current matter.

Please email back to: Anne.Figueroa@asm.ca.gov