



29<sup>TH</sup> JUDICIAL DISTRICT OF KANSAS

General Authorization for Release of Information

The undersigned hereby authorizes the members of the Wyandotte County District Attorney's Office, Conviction integrity Unit to thoroughly investigate my claims of wrongful conviction and/or actual innocence.

I understand that to thoroughly investigate all credible and verifiable claims, the Conviction Integrity Unit may need to gather records, locate and speak to those who have supporting information about the claims, including prior counsel. I hereby authorize the Conviction Integrity Unit to speak to the following and gather the following records (please initial all that apply):

\_\_\_ Medical Information (also known as Protected Health Information or PHI) from the dates of \_\_\_\_\_ to \_\_\_\_\_.

\_\_\_ Prior Attorney Files

\_\_\_ Interview Previous Counsel

\_\_\_ Interview Named Persons in Support of the Claims

\_\_\_ Incarceration Records (including, but not limited, to conduct violations)

\_\_\_ Confidential Records (including, but not limited to, financial/banking records, SRS/DCF Records, and other administrative agencies)

\_\_\_ Any records not named above that may prove to be pertinent to the investigation of the claim.

I understand that I may revoke this authorization at any time and cease all further investigation of my claims. I further understand that not agreeing to release information does not bar my case from review, but the Conviction Integrity Unit may consider such refusals in making a recommendation to accept or decline my case for further review. I voluntarily choose to release information for the above initialed counsel and/or agencies and said authorization expires one year from the date executed.

\_\_\_\_\_ **Date**

\_\_\_\_\_ **Claimant**

State of \_\_\_\_\_ )  
 )ss:  
County of \_\_\_\_\_ )

On this, the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, before me a notary public, the undersigned, personally appeared \_\_\_\_\_, known to me, or satisfactorily proven, to be the person whose name is subscribed within the instrument, and acknowledged that he/she executed the same for the purposes therein contained.

In witness hereof, I hereunto set my hand and official seal.

\_\_\_\_\_  
Notary Public