

Notification and Authorization to Release Information

To: United State Department of Agriculture (USDA), Natural Resources Conservation Service (NRCS)

I, _____ (please print full name)
hereby authorize the release of my individual records that are in the custody of the USDA, NRCS, to the
following named individual(s) or representative(s) of the following organization(s):

List name(s) or organization(s):

This authorization pertains to the following information (initial in block):

Any/all information in my files

~or~

Only the following information listed below (include dates):

I understand and acknowledge that NRCS cannot be responsible for ensuring the confidentiality of released records.

Current Address: _____

Social Security Number (Last four numbers only): XXX-XX-_____

Signature: _____

Date signed: _____

Date this release expires: _____