

**REQUEST TO RELEASE EXEMPT INFORMATION
(Official Records)**

Pursuant to Chapter 119.071(4)(d) Florida Statutes

I, _____ authorize the Clerk of the Circuit Court to release
the below un-redacted documents from the Volusia County official records containing exempt
information to _____.

Print

Print

Please indicate method of receipt by authorized party:

- _____ Pick up at the Volusia County Courthouse, Room A121, 101 N. Alabama Ave. DeLand, FL
- _____ Pick up at the Daytona Beach Courthouse Annex, Room 100, 125 E. Orange Ave. Daytona Beach, FL
- _____ Email - Please provide email address _____
- _____ USPO Mail - Please provide mailing address _____

Print

Documents to be released by the Clerk of the Circuit Court:

<u>NAME OF DOCUMENTS</u>	<u>DOCUMENT NUMBER</u>	<u>BOOK/PAGE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If additional space is required, provide a supplemental page

Notary Acknowledgment

The information provided on this request for release is itself to be kept confidential. The Volusia County Clerk's Office staff may only use the information in order to process my request. I agree to indemnify and hold harmless the Volusia County Clerk of Court and the Clerk's staff for any direct, indirect or consequential claims or damages that may result in connection with this request for release of exempt information.

Signature of Individual _____ Date: _____

State of _____ County of _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization.

Sworn to (or affirmed) and subscribed before me this _____ day of _____, _____,

by _____ Personally known _____ or produced identification _____.

Type of identification produced _____.

Signature of Notary _____

(Notary Seal)