

KANABEC COUNTY FAMILY SERVICES
Office of Child Support
905 Forest Avenue East - Suite 150
MORA, MINNESOTA 55051
FAMILY SERVICES: 320/679-6350 CHILD SUPPORT: 320/679-6384
FAX: 320/679-6351

General Consent for Release of Information

Minnesota Data Privacy Act (Minn. Stat., Ch. 13)

Giving Consent : I give my consent to the Kanabec County Child Support Office (KCCSO) to discuss and exchange any information regarding me and my child support case with:

Name

Address

Reason for Consent: *(ex: I am incarcerated, I am disabled, etc.):*

Purpose for which person may use information now or in the future:

Consequences: I know that State and Federal privacy laws protect my records. I know that if I want information released I must give my prior written consent for KCCSO to give out information. I know why I am being asked for this consent. I know I may refuse to sign this release. I know that I will still receive Child Support services even if I do not sign this release. I know that I may revoke this consent by providing my child support worker with written notice at any time, but that this written notice will not affect information KCCSO has already released because of this consent. I understand that the person I am authorizing to receive information may disclose information to others so that it is no longer private.

This Consent will expire upon the closing of my Child Support case or one year from the date I sign it, whichever is earlier.

Signature _____

Name (print) _____

Address _____

Date _____

For Staff Use Only

Copy Provided to signer

Accepted

Declined (Reason) _____
