**Prisoner Business Case Record Information Release:**

Name of Holding Institution:

To Whom It May Concern:

I, , (prisoner’s printed name) herby authorize and request that the Department of Corrections release the information indicated below to the:

# □ Better Business Bureau

For verification of membership application for prisoner business and reporting business related complaints. Specific information authorized to be released includes description of any actual or proposed business activities conducted by the prisoner; conviction(s) for any crime directly related to the nature of the proposed or actual business; any complaints received by potential or actual customers / clients; and any observations of prisoner conduct that would/could influence B.B.B. membership.

# □ Internal Revenue Service

For verification of income tax reports for prisoner-operated business. Specific information authorized to be released includes banking transactions, prisoner account transactions, and any financial records relating to the prisoner’s business or income.

# □ Department of Community and Economic Development

For verification of Alaska Business License Application. Specific information authorized to be released includes description of actual or proposed business activities conducted by the prisoner during the incarceration and conviction(s) for any crime directly related to the nature of the actual or proposed business.

Prisoner’s Signature Authorizing Release: Date:

Prisoner’s Printed Name:

Witness Signature: Date:

Witness Printed Name:

Distribution:

Original to prisoner case record.

Copy to prisoner.

Copy to agency to whom information is released.