



I hereby authorize L.P.S.C. LLC. and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas:

Verification of social security number; current and previous residences; employment history including all personnel files; education including transcripts; character references; credit history and reports; criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; birth records; motor vehicle records to include traffic citations and registration; and any other public records or to conduct interviews with third parties relative to my character, general reputation, personal characteristics or mode of living.

I hereby release L.P.S.C. LLC. and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release. You may contact me as indicated below.

Print Name: _____

Current Address: _____

Previous Address: _____

Soc. Sec. Number: ____ - ____ - ____
(I.D. Purposes Only)

Date of Birth: ____/____/____

Drivers License Number/State: _____

Telephone number: _____

Signature: _____

Send Responses to: MDeBiase@LPSCservices.com or Fax to 203.549.0816