

Office of the Sheriff

Mahaska County

RUSSELL J. VAN RENTERGHEM
Sheriff

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Civil Supervisor

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BEN JOHNSTON
Chief Deputy

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Jail Adm.
Jail
(641) 673-2591



INFORMATION RELEASE

NAME _____

DATE OF BIRTH _____

ADDRESS _____

SOCIAL SECURITY NUMBER _____ TELEPHONE _____

TO WHOM IT MAY CONCERN:

I, the undersigned, hereby grant permission to disclose and/or deliver to applicable officials of the Mahaska County Sheriff's Office, Oskaloosa, Iowa and all information contained in my record. Such information disclosed or delivered may include my complete case history, as shown by my school, employment and/or institution records, or by my past medical history, or any other information relating to my application for employment for Mahaska County, Oskaloosa, Iowa.

I, the undersigned, also grant permission to disclose and/or deliver any and all information concerning any prior arrest and/or criminal record I may have of any type or sort, as well as any record which may exist concerning my involvement with drugs or alcohol.

Signature

Date