

Superior Court of Cobb County Criminal History Authorization Form

I, _____, do hereby authorize the Cobb County Superior Court to review my criminal history record.

Full Name: _____

Social Security Number: _____

Date of Birth: _____

Place of Birth: _____

Race: _____

Sex: _____

Present Home Address: _____

Driver's License Number: _____

I have read the above questions and answers and they are correct and true. The undersigned swears that the information given herein is true and correct and I understand that a false answer to any item may result in criminal charges.

This ____ day of _____, 2009.

(Signature)

Notary Public

Sworn and subscribed before me

This ____ day of _____, 2009.

Notary Public, _____ County,

My commission expires: