



**Federal Emergency Management Agency Disaster Field Office
312 Hazeltine Drive
Chaska, Minnesota 55318**

Phone: (952) 556-3400 FAX: (952) 368-0910

RELEASE OF CONFIDENTIAL INFORMATION

I, the undersigned, authorize the **FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA)** to release any information it maintains to voluntary agencies including, but not limited to--the American Red Cross, The Salvation Army, United Methodist Committee on Relief, Catholic Charities, Lutheran Social Service/Lutheran Disaster Response, Christian Reform World Relief Committee, Nechama Jewish Disaster Response, MN/WI Baptist Convention, Church World Service, Presbyterian Church USA, United Church of Christ MN Conference, American Baptist Men, Adventist Community Services, The Mennonites, Church of the Bretheren--and appropriate nonprofit organizations and appropriate Federal and State agencies and their representatives. This authorization is given for the sole purpose of obtaining and/or providing assistance I need as a result of flooding and tornadoes which resulted in the May 16, 2001 Federal Disaster Declaration for the State of Minnesota designated FEMA-1370-DR-MN.

I understand and acknowledge that this authorization extends to the release of information that would be deemed confidential under any Federal or State Privacy Acts. I further understand and acknowledge that the release of this information does not guarantee that I will get assistance from FEMA or from any other agency, but that without this information my case cannot be presented by FEMA to other agencies or organizations for consideration.

**Signature of Client
(Applicant or Co-applicant)

**Date

Printed Name of Client

FEMA Control No.: _____(Optional)

FEMA Control No.: _____ (optional)

Pre-Disaster Address: _____

**Current Address and phone number: _____

Information **must be provided for Release to be effective