

CATHOLIC HUMAN SERVICES, INC.  
**AUTHORIZATION FOR RELEASE OF INFORMATION**

YOUR INFORMATION

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Person/Organization **providing** the information:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Person/Organization **to receive** the information:

RECORDS DEPOSITION SERVICE, INC.  
PO BOX 5054  
SOUTHFIELD, MI 48086 - 5054

Phone: 248.357.3330 Fax: 248.357.3337

I further authorize the above two named individuals/organizations to **release information to each other.**

**Information to be released.** Specify the type(s) of information, or specific dates of information.

This may include alcohol and substance abuse records protected by federal regulation (42 CFR, Part 2), unless specified.

Purpose for the use or release of the information:

FOR DISCOVERY BEFORE TRIAL

I understand the following:

- This authorization is voluntary and I may revoke it at any time verbally or in writing.
- I may refuse to sign this authorization and my treatment or payment for care will not be affected by refusal.
- State and federal law prohibit persons that receive mental health or alcohol or drug abuse records from re-disclosing those records without permission.
- I will be informed if the person requesting the information is to receive financial or in-kind compensation in exchange for using or disclosing the health information described above.
- I am entitled to receive a copy of this authorization.
- This authorization is effective from the date signed below and will **automatically expire 12 months from the date of the signature or at discharge, unless as specified:**

Date to expire: \_\_\_\_\_

Event: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of individual or individual's legal representative

\_\_\_\_\_  
Printed name of legal representative and relationship to individual

This form is designed to comply with federal regulations for substance abuse services, Title 42 of the Code of Federal Regulations, Part 2, and federal regulations for privacy of protected health information, Title 45 CFR Parts 160 and 164, and Michigan Mental Health Code (Act 258 of the Public Acts of 1974, as amended; Sections 748, 748(a) and 750).