

Motor Vehicle Records Information Release Form

DocuSigned by:

Austin

A878872FB91E4E1

I, _____, hereby consent to the release of my Motor Vehicle Records ("Records") to McKenney's, Inc. ("McKenney's"). I understand McKenney's may use these Records to evaluate my suitability to fulfill driving duties that may be related to employment with McKenney's.

First, Middle, Last Name:		
Driver's License State/ Number:		
Date of Birth: (MM/DD/YYYY)		

Signature_____
Date