

# AUTHORIZATION AND REALEASE TO OBTAIN INFORMATION

I hereby authorize Journey Transport LLC to obtain records concerning my driving performance and monitor my driving record. This authorization shall remain in effect over the course of my employment.

Federal State reports may be ordered periodically during the course of my employment.

I hereby release and hold harmless any person that discloses matters in accordance with this

authorization, as well as Journey Transport LLC from the liability that might otherwise result from the request for the use of any/or disclosure of any of the foregoing information. I agree that a copy this authorization has the same effect as an original.



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Full Name (Print Clearly)	Signature	Date
111111	AL	2019-01-12

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Driver's License #

State Licensed

Date of Birth