



# Clerk of the Circuit Court & Comptroller

Office of Gary J. Cooney, Clerk & Comptroller

P.O. Box 7800 • 550 W. Main St. • Tavares, FL 32778-7800 • [www.LakeCountyClerk.org](http://www.LakeCountyClerk.org)

## RELEASE OF EXEMPT INFORMATION

*(Subparagraph 119.071(4)(d), Florida Statutes)*

- Request type (select one):  Individual is deceased (provide certified copy of death certificate)  
 Individual has had a change of home address  
 I am the individual and am requesting a copy

Documents to be released:

Name Listed on Document	Document Number or Book/Page

\*If more space is needed, provide a supplemental page.

The aforementioned records pertaining to me and recorded in the Official Records of Lake County, Florida, have exempt information which has been redacted, pursuant to 119.071, Florida Statutes. **This form must be notarized.** I hereby authorize the release of the aforementioned document(s) in unredacted form to the individual/company listed below:

Individual or Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone Number

STATE OF FLORIDA  
COUNTY OF LAKE

Sworn to or affirmed and subscribed before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

(Name of Person Signing)

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_  
(Print, type, or stamp commissioned name of notary or clerk.)

Personally known or  Produced identification of \_\_\_\_\_.