

Non-Consent Form

This form must be notarized.

Print Complainant's Name:

(first) (middle initial) (last)

Complainant's Gender:

Male Female

Complainant's Date of Birth:

Complainant's Address:

Complainant's Telephone:

I, the above-listed complainant, did not give consent for anyone to use personal identifying information or documents belonging, assigned, or otherwise associated with me, or any person under my legal guardianship:

1. to obtain credit, money, goods, services, employment, or any other thing of value or benefit;
2. to avoid civil or criminal process or penalty;
3. to harm my or any person under my legal guardianship's reputation, property, person, or estate.

(Complainant's signature)

Notary Information Below:

This _____ day of _____, _____
My commission expires _____