



# System Council U-4 IBEW

Representing Local Unions: 359, 622, 627, 641, 759, 820, 1042, 1066, 1191, 1263, 1908  
Phone: 561-624-2700 Fax: 561-624-5072 • 3944 Florida Blvd. Palm Beach Gardens, Fl. 33410

## RELEASE OF EMPLOYEE RECORDS AUTHORIZATION

I, \_\_\_\_\_, authorize the Business Manager of the System Council U-4, IBEW or his designee, complete access to my personnel files. This includes medical records, absentee records, report of disciplinary action, personnel evaluations, payroll records and any other records as deemed necessary by the Business Manager.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, by

\_\_\_\_\_  
(name of employee acknowledging).

(Notary Seal or Stamp)

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Name of Notary, Printed or Stamped

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_