

JUN 10

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

Not for use where consent is needed for participation in drug abuse programs or research projects, or for contact with news media. The appropriate form for each of these areas is to be substituted.

1. I (Name of Inmate) <i>Barett Brown</i>	2. Register Number <i>45047-177</i>
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3. Authorize (Person, Agency, Org.) FEDERAL BUREAU OF PRISON	4. To disclose to (Recipients) <i>Information for release</i>
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5. The following information: (Initial one that applies):

- (a) For Community Programming: (To educational facilities, Social Agencies, prospective employers, etc.)

That I am currently in the custody of the U.S. Attorney General either serving sentence or under supervision of the U.S. Parole Commission or U.S. Probation Office and any and all information in my Inmate Central File except as indicated below:

*BB*

(Initials)

(b) Other Objective (Specify Information)

\*\*\*IDENTIFY WHICH OPTION YOU PREFER\*\*\*

(Initials)

6. Disclosure is made for the purpose of

*media news interview*

7. I understand that I may revoke this consent in writing at any time except to the extent that disclosure has already been made based on that consent. In any event this consent ceases to be effective (Initial applicable):

- (a) For Community Programming: Upon my release from supervision

*BB*

(Initials)

(b) Other Objective: (3 months from signature date)

(Initials)

8. Inmate's Signature

Date

*5/1/17*

JUN 10

## NEWS INTERVIEW AUTHORIZATION CDFRM

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

Inmate's name and number (print)

Date

Name of Institution

Name of news media representative

Address of media represented

I, the above-named inmate, do hereby freely give permission to the above-named news media representative to interview me on or about date: when scheduled and I do hereby authorize the news media represented by this person to use any information gathered about me during this interview for any legitimate purpose. I further authorize the Bureau of Prisons and the Department of Justice, and their authorized representatives, to release to representatives of the news media any documents or information relating to allegations or comments made by me in this interview.

Inmate's Signature

Witness

Title

I, the above-named inmate, refuse permission to the above-named news media representative to interview me.

Inmate's Signature

Witness

Title

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I, the above-named inmate, do further freely give permission to the above-named news media representative to make recordings of my voice during this interview and to make photos of me (still, movie, or video) and I do hereby authorize the use of such pictures or recordings by the news media represented by this person for any legitimate purpose.

Inmate's signature

Witness

Title

Record Copy - Inmate's File; Copy - Media Representative