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Date: _____

The Department of Children Youth and Families, Attn: Natasha House/Records Center
natasha.house@dcyf.ri.gov

Re: Adam Walsh Child Abuse Registry

Dear Natasha:

This letter serves as authorization for the State of Rhode Island Department of Children Youth and Families to conduct a search of the Child Abuse and Neglect Tracking system (CANTS) to determine whether the below-listed subject has been a perpetrator of an indicated incident of child abuse and/or neglect or involved in a pending investigation. I further consent to the release of this information to the agency listed below.

Name: _____
Last First Middle

Date of Birth: ____ / ____ / ____

Current Address: _____
Street / Apt. # City State Zip Code

If you currently reside in Rhode Island, please list all previous addresses for the past five years.

OR

If you currently reside out-of-state, please provide ALL Rhode Island addresses in which you did reside while living in Rhode Island

(Street/Apt#/City/County/State/Zip Code)	Dates (From/To)
_____	_____
_____	_____

List maiden name and/or all other names by which you have been known: (last, first, middle)

Subject's Signature

Date

Receiving Agent's Signature – Michelle L. Pyan, President
Agency - Commercial Investigations LLC

Date
Fax Results To: 212-937-3058