

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

In Re Flint Water Cases

No. 5:16-cv-10444-JEL-MKM

HON. JUDITH E. LEVY

MAG. MONA K. MAJZOUB

EXHIBIT 11.5

CONSENT TO RELEASE OF EMPLOYMENT RECORDS

To: _____

[Name and address of employer who will be releasing the records]. This entity/person is referred to as "Employer" in this Consent Form.

This request for information from the employment records, is made with respect to the following employee, who is referred to as "*Employee*" in this Consent Form:

Name of Employee: _____

Date of Birth: _____

Social Security No.: _____

Address: _____

Please provide information from the employment records of the Employee to the following person:

[Name and address of person to whom the employment records will be released]. This person is referred to as "*Recipient*" in this Consent Form.

I, Employee, consent to release of my complete personnel file and all of my employment records to the Recipient, including all disciplinary records, financial records, and medical records. I waive any written notice of the release of such records that may be required by federal or state law. I authorize Employer to release all of this information without liability for damage resulting from such release. I understand that the information disclosed pursuant to this authorization may be subject to re-disclosure by the recipient and, to the extent applicable, no longer be protected by HIPAA. I understand that this authorization will be effective until I revoke it in writing and deliver the revocation to Employer at the address listed above.

A PHOTOCOPY OR FACSIMILE OF THIS DOCUMENT SHALL BE CONSIDERED VALID AS IF THE ORIGINAL WERE OFFERED.

Dated: _____

Signature: _____

Employee: [name] _____