Explanation of Opt-Out Request

Please describe the facts and circumstances that caused you to submit your request for your records to be suppressed under the LexisNexis Opt-Out process.

Keep in mind to submit your request, you must be one of the following:

- A state, local or federal law enforcement officer or public official and your position exposes you to a threat of death or serious bodily harm; or
- A victim of identity theft; or
- Protected by a court order and your situation exposes you to a risk of physical harm.

Explanation:

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Individual's Signature

_____
Individual's Printed Name