



**OKLAHOMA DEPARTMENT OF HUMAN SERVICES**  
 Confidential Intermediary Search Program  
**Confidential Intermediary Results Report**



**Confidential intermediary.**

Name		Identification number
Address		
Phone number	Fax number	E-mail address

**Client.**

Name		Social Security number
Address		
Home phone number	Work phone number	E-mail address

**Documents attached.**

- Form 04CI001E, Request for Confidential Intermediary Search
- Expense statement
- Other documents
- File review statement
- Consent/Refusal documents
- Search Document Check List

**Search Subject (if known).**

Name	Social Security number
Address	Phone number

**Search results**

Consent to disclose identifying information given: \_\_\_\_\_  
Date

Consent to disclose identifying information denied: \_\_\_\_\_  
Date

Special instructions regarding method of contact:

Information from interview with subject of search:

Additional comments or information from confidential intermediary:

Number of hours searched	Over what period of time
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Confidential intermediary

Date