

Customer Authorization for Release of Records or Information

Right to Financial Privacy Act

I, _____, having read the explanation of my rights
(*name of customer*)
which is attached to this form

(*attach Section 3410 of the RFPA - <http://www.bankersonline.com/regs/rfpa/3410.html>*)

hereby authorize the _____
(*Name and Address of Financial Institution*)
to disclose the following financial records or information:

to: _____,
(*Names of Government Authorities Allowed Access*)

for the following purpose(s):

I understand that this authorization may be revoked by me in writing at any time before my records or information, as described above, are disclosed, and that this authorization is valid for no more than three months from the date of my signature.

_____, 200_

(*Signature of Customer*)

(*Address of Customer*)
