

CONSENT FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I Authorize collection agencies, credit bureaus, law enforcement agencies, consumer reporting agencies, and other sources of information to provide information about me including, but not limited to, financial, credit, tax, immigration and criminal investigative information to the Office of the Comptroller of the Currency (OCC) for the purpose of making a determination as to my experience, competence, integrity, character, financial ability, and willingness to direct and/or lead a bank's affairs in a safe, sound, and legal manner.

I Authorize custodians of records and sources of information pertaining to me to release information upon request of the investigator, special agent, or other duly accredited representative of the OCC regardless of any previous agreement to the contrary.

I Understand that the information released by records custodians and sources of information is for official use by the OCC only and that it may be redisclosed by the OCC only as authorized by law.

Copies of this consent that show my signature are as valid as the original release signed by me.

This consent is valid for one (1) year.

Signature (Sign in ink)

Full Name (Type or Print Legibly)

Date Signed

Other Names Used

Social Security Number

Current Address (Street, City)

State

ZIP Code

Home Telephone Number (Include Area Code) ()