

AUTHORIZATION FOR RELEASE AND DISCLOSURE OF RECORDS

TO: _____ (Bank)

RE: Name: _____

Social Security No. _____

You are hereby authorized and permitted to disclose to Walk & Murphy, P.L.C., Aaron R. Murphy and/or Mark L. Walk, and/or _____ and/or their designated agents or representatives all records and documents regarding any and all accounts owned, or in which _____ has an interest in, said records in your possession or under your control regarding the above named, and to permit those individuals named in this authorization to make photocopies or other copies of any said records as they may desire.

A copy of this authorization shall have the same force and effect as the original hereof.

Date this _____ day of _____, 20____.

Signature

Printed Name

STATE OF IOWA)
)SS
COUNTY OF _____)

On this _____ day of _____, 200____ before me, the undersigned, a Notary Public in and for the State of Iowa, personally appeared _____ to me known to be the identical person named in and who executed the foregoing instrument, and acknowledged that he executed the same as his voluntary act and deed.

Notary Public in and for State of Iowa