

BACKGROUND CHECK FINANCIAL RECORD RELEASE

APPLICANT INFORMATION

Name:

Date of birth:

SSN:

Phone:

Current address:

City:

State:

ZIP Code:

Please enter all the states you have lived in.

SPOUSE INFORMATION (IF REQUIRED)

Name:

Date of birth:

Current address:

City:

State:

ZIP Code:

Please enter all the states you have lived in.

FINANCIAL RELEASE OF INFORMATION

I/we hereby authorize release of financial information concerning my financial assets including bank accounts, investment accounts, real property and intellectual property. I authorize the release of all account numbers; name(s) of person(s) establishing account; date each account was established; name under which account(s) are held; name and address where statements are sent; name(s) of person(s) authorized to withdraw funds from account(s) and, copies of signature cards.

I/we hereby release, discharge, exonerate the _____, their agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing and inspection of such documents, records and other information, and the release shall be binding on my legal representatives, heirs, and assignees.

This release will expire 120 days after the date signed.

SIGNATURES

I, _____ certify the information above is accurate.

I authorize the verification of the information provided on this form.

Signature of applicant:

Date: _____

Signature of spouse (*only if applicable*):

BACKGROUND CHECK FINANCIAL RECORD RELEASE

Date: _____