.

By signing the line below, I hereby authorize to release to the information requested and to discuss same with them, said to remain in effect until rescinded.		
The section be	low is to be completed by	your bank.
	ACCOUNT INFORMATION	
Account Name:		
Address:		
Financial Institution:		
Customer Since:	Information is current as of:	
	Checking	Savings
Current Balance:	\$	\$
Average Balance: (last 12 months)	\$	\$
LIN	ES OF CREDIT INFORMATION	
Line of Credit	Working Capital	Equipment
Total Approved Credit:	\$	\$
Amount Currently Borrowed:	\$	\$
Maximum Borrowed: (last 12 months)	\$	\$
Minimum Borrowed: (last 12 months)	\$	\$
Expiration Date:		
In compliance with all covenants?	Yes No	Yes No
	GENERAL INFORMATION	
Comments:		
	COMPLETED BY	
Name:	Title:	
Bronch	 Dhanai	
E-mail:	Fliolie	
E-mail.		
Signature	Name	Date
U		

NASBP