

BANK INFORMATION RELEASE

Dear Customer: Banking institutions now require a customer's written consent before releasing any information. In order to process your request for a charge account, please complete the first portion of this page, including bank account number(s), and return it to us with the application.

THANK YOU FOR SHOPPING WITH US



(Please Type or Print)

Date _____

Bank Name _____

Bank Address _____

Bank City / ST / Zip _____

Checking # _____

Your Company Name _____

Company Address _____

Company City / ST / Zip _____

Savings # _____

Please release the following information concerning our checking account and/or savings account to Arvey.

Your Company Authorized Signature _____ Title _____

(DO NOT WRITE BELOW THIS LINE)

Authorized Company Signature _____ Title _____

Amount of Credit Line Involved \$ _____ Date Account Opened (Checking) _____

Average Balance _____

Loans _____

NSF Activity _____

Remarks _____

Bank Signature _____

Title _____