

# MINUTE MAN SERVICES, INC.

3318 N. MAIN, ROYAL OAK, MICHIGAN 48073 (248) 585-6300 ♦ FAX (248) 585-5822

## AUTHORIZATION FOR RELEASE OF FINANCIAL INSTITUTION INFORMATION

TO: \_\_\_\_\_

RE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY NO: \_\_\_\_\_

ACCOUNT NUMBER(S) \_\_\_\_\_

I, \_\_\_\_\_, authorize any bank, credit union, or any other financial institution to provide information regarding checking accounts, savings accounts, joint accounts, trusts, safe deposit boxes, balances on any trusts, any balances on accounts, signature cards, account closings, transfers, withdrawals, stocks, bonds, mutual funds, or any other financial information to:

**MINUTE MAN SERVICES, INC., 3318 N. MAIN, ROYAL OAK, MI 48073**

The information being sought is to be used in the evaluation of a pending legal suit. Failure to authorize release of this information may cause delay in the processing of that suit. A photostatic copy of this authorization shall serve in its stead.

This authorization is valid for one (1) year after the date it is signed, but may be revoked on written request to **MINUTE MAN SERVICES, INC., 3318 N. MAIN, ROYAL OAK, MI 48073.**

SIGNED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
ACCOUNT HOLDER/PARENT/ SPOUSE/GUARDIAN/CONSERVATOR

Subscribed and sworn to before me this \_\_\_\_\_ Day Of \_\_\_\_\_, \_\_\_\_\_

Notary Public, \_\_\_\_\_ County, Michigan, acting in \_\_\_\_\_ County

My Commission Expires: \_\_\_\_\_

Notary Signature: \_\_\_\_\_