

AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION

Banking Institution Name _____

Letter of Credit Number _____

I hereby authorize release of confidential information to the above named banking institution for the purpose of making demand for payment on the letter of credit specified above as long as the obligation remains in force and effect. Release of this information to the named banking institution does not give the banking institution authority to request information other than information concerning the breaches for which a demand for payment is being made. I also release the Commissioner of Finance and Division of Finance personnel from any and all liability pursuant to any disclosure to this banking institution of confidential information resulting from release of subject information under Sections 361.070 and 361.080, RSMo. 2001 and supplements thereto.

Owner/Officer _____

Title _____

Owner/Officer Signature _____ Date

State of Missouri)
) ss.
County of _____)

Subscribed and sworn to before me this _____ day of _____, 20 ____.
My Commission expires _____, 20 ____.

Notary Public