

BANKING RELEASE AUTHORIZATION

I hereby authorize and direct, with full release of liability, to furnish Mountain Temp Services, LLC., full and complete information regarding my banking experience; including the approximate balances in my checking/savings accounts and the amount, balance and record of payment of any loans for which I may have applied, as indicated.

◆All information supplied is strictly confidential◆

Bank Name: _____	
Address: _____	

_____	_____
Phone	Fax

Name of Business As Appears On Account: _____

Account Representative: _____
Title Email

Business Account #: _____

Savings Account #: _____

Checking account #: _____

Signature _____ Date _____ Title _____

The undersigned as inducement to grant credit warrants that the information submitted is true and correct. Mountain Temp Services is authorized to investigate the bank information listed.

*****For Office Use Only-Bank Reply*****

Checking Account#: _____
DATE OPENED: ____ / ____ / ____
AVERAGE BALANCE: \$ _____
RELATIONSHIP: Poor <input type="checkbox"/> Good <input type="checkbox"/> Excellent <input type="checkbox"/>

Savings Account #: _____
DATE OPENED: ____ / ____ / ____
Average Balance: \$ _____
RELATIONSHIP: Poor <input type="checkbox"/> Good <input type="checkbox"/> Excellent <input type="checkbox"/>

Date Loans Opened:	High Credit:	Balance:	Rating:
1. ____ / ____ / ____	\$ _____	\$ _____	_____
2. ____ / ____ / ____	\$ _____	\$ _____	_____

Bankers Signature: _____