



888 Digital Inc.
1416 E Linden Ave
Linden, NJ 07036
(T) 908 583 9300
(F) 908 583 9400

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

Re: Customer ID- _____

To: Financial Institution

Bank Name: _____

Address: _____

Contact: _____ Phone: _____ Fax: _____

Please accept this authorization to release the following information to 888 Digital Inc., for the purpose of extending credit.

I/We understand that this information will be kept in the strictest confidence between your organization and 888 Digital Inc.

Checking Acct # _____ Savings Account # _____

Authorized Signature _____ Title _____ Date _____

******FOR BANK USE ONLY******

Account Holders Name _____

Checking Acct # _____ Date Opened _____

Additional Acct # _____ Date Opened _____

Current Balance _____ Average Balance _____ Any NSF Check _____

Loan Information _____ Lines of Credit Extended _____

Overall Rating / Comments _____

Prepared by _____ Title _____ Date _____