# Sioux Munyon 

Insurance Services
10801 Redlander Way, Lakeside, CA 92040
phone: 619/463-2773 fax: 619/342-8531
www.siouxmunyon.com
License \#0B99748

AUTHORIZATION TO RELEASE REQUESTED INFORMATION


Acct. \#:

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B y:
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$\qquad$
RE: $\qquad$
We are currently updating our underwriting file for the purpose of providing continued surety credit to this mutual client. We would appreciate your confirming the particulars for the topics below. This information will be treated in strict confidence. Thank you for your cooperation. Please contact our office with any questions.

Sioux Munyon
Surety Account Executive

## PLEASE COMPLETE AND RETURN TO SIOUX MUNYON INSURANCE SERVICES

1. Average Deposit Balances:
a. General account: $\qquad$ b. Payroll account: $\qquad$
c. Savings account or certificates: $\qquad$
d. Other (please explain): $\qquad$
2. Line of Credit:
a. Amount: $\qquad$ b. Terms:
c. Secured by:
d. Exp. date: $\qquad$ e. Amount currently outstanding: $\qquad$
3. Term Loans:
a. Amount: $\qquad$ b. Secured by:
$\qquad$
c. Amount presently outstanding: $\qquad$
4. Is this client acting as an endorser or guarantor on any credit agreement with your bank for any other party?: $\qquad$ If yes, please explain: $\qquad$
5. General comments:
6. $\qquad$

By: Date: $\qquad$
Title:
$\qquad$
$\qquad$

