



First National Bank
of America

Third Party Authorization

Name: _____

Account #: _____

I, _____ authorize First National Bank *of America*
to discuss and release any and all information pertaining to my First National Account
with: _____

(please print) (example: Spouse, neighbor, son, daughter)

Authorized Person's Address: _____

Authorized Person's Phone Number: _____

*First National Bank *of America* has permission to discuss and release any and all information until
otherwise notified. First National Bank of America will not be liable if, for any reason, they decline
to release information to a third party.

Signature: _____

Date: _____

Please Return to:
First National Bank *of America*
Attn: Customer Service
P.O. Box 980
East Lansing, MI 48826

Any questions or concerns please contact:
Customer Service at: 1-800-266-7661