

AUTHORIZATION and REQUEST for RELEASE of FINANCIAL INFORMATION

Dear

This is to AUTHORIZE and REQUEST you to furnish to:

Woodruff Family Law Group
420 West Market Street
Greensboro, NC 27401

or any representative of that firm, any and all information, including statements and balances on the following:

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The purpose of the requested disclosure is: (1) to assist my attorneys in evaluating my divorce settlement; or (2)

This consent is revocable except to the extent that action has been taken in reliance thereupon, and this consent will remain in force for at least three (3) years.

Very truly yours,

Sworn to and subscribed before me this

The _____ day of _____, 1998.

Notary Public