

RELEASE

I hereby authorize WAYPOINT BANK, Cozad, Nebraska (name of financial institution), to obtain a complete and full criminal record, including all notations of arrest. I understand that the financial institution may subsequently provide the Nebraska Department of Banking and Finance with a copy of such criminal record.

Name: _____

Social Security Number: _____

Signature: _____

Date: _____

State of _____)

) ss

County of _____)

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public