



3rd Party Authorization Form

Today's Date:

Borrowers Names (Please Print) _____

Property Address: _____

I/We authorize Westar FCU to speak to you on my/our behalf regarding my account with you.

Access to discuss all information regarding my account.

Other (please specify) _____

This authorization is valid for the following:

Valid for 60 days for the date above.

Name of the authorized party(s) or Company Name - Please Print Clearly:

Borrower Signature

Borrower Signature