AUTHORITY TO OBTAIN INFORMATION FROM OUTSIDE SOURCES

STATE OF		

PARISH/COUNTY OF _____

BEFORE ME, the undersigned notary public	lic, personally came and appeared
wł	no, after being duly sworn by me,
notary, did depose and say that he/she hereby a	authorizes the Office of Financial
Institutions, State of Louisiana, to make inquiries fr	om any financial institution, credit
bureau or law enforcement agency for the purpose	e of determining his/her financial
responsibility, character and fitness in connection	n with his/her appointment as a
director/officer of	,
Louisiana.	
This document was executed on the	day of,
20	
	Affiant
Social Security Number:	-
Date of Birth:	_
CHIODN TO AND CUDCODIDED before see this	J
SWORN TO AND SUBSCRIBED before me this 20	day of,
	Notary Public

Print Name of Notary Public

[06/2002]