



AUTHORIZATION TO RELEASE PERSONAL FINANCIAL INFORMATION

INSTRUCTIONS FOR USE

The Authorization to Release Personal Financial Information should be used when it is necessary that a client's financial information be made available to Third Party Professionals such as an Attorney or CPA.

Please print page two of this document on your approved J.W. Cole Financial, Inc./J.W. Cole Advisors, Inc. letterhead prior to completing and obtaining your client's signature.

Please maintain a copy of the completed document in the appropriate client files.



AUTHORIZATION TO RELEASE PERSONAL FINANCIAL INFORMATION

Date

Client #1 Name

Client #2 Name

Account Number(s)

I/We authorize J.W. Cole Financial, Inc./J.W. Cole Advisors, Inc. to release my/our personal financial information to:

Name

Address Line 1

Company

Address Line 2

City

State

Zip

This release covers all account information that has been provided by the above named account owner(s). However, J.W. Cole Financial, Inc./J.W. Cole Advisors, Inc. and its agents will not disclose your social security number(s) for any reason.

I/We understand that J.W. Cole Financial, Inc./J.W. Cole Advisors, Inc. and its agents are not responsible for the maintenance of any personal financial information once it is disclosed pursuant to this authorization.

Client #1 Name (Print)

Client #2 Name (Print)

Client #1 Signature

Date

Client #2 Signature

Date