

# THIRD PARTY RELEASE FORM

SPC Financial®

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I, we \_\_\_\_\_

hereby authorize SPC Financial® to release our/my financial information to:

\_\_\_\_\_ for purposes of

\_\_\_\_\_.

Financial information can be mailed, faxed or e-mailed.

**This Third Party Release Form is in effect until revoked in writing by one of the signors.**

Client  
Signature \_\_\_\_\_

Client  
Signature \_\_\_\_\_

Print  
Name \_\_\_\_\_

Print  
Name \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

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