

FORM OFR-U-10A
(ADDENDUM TO FORM OFR-U-10)
AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION

Please fully execute each authorization below. This form permits physical presence or online notarization in accordance with Chapter 117, Parts I and II, Florida Statutes (2019). Electronic notarization that complies with section 117.021, Florida Statutes, is permitted as well. The notarial certificate may be modified as necessary to conform with those requirements.

TO WHOM IT MAY CONCERN:

I, _____, hereby authorize and request every person, firm, officer, corporation, association, organization or institution having control of any documents, records or other information pertaining to me to furnish the original or copies of any such documents, records or other information to the Florida Office of Financial Regulation or any of its authorized representatives for purposes of inspection or copying pursuant to Florida Statutes.

SIGNATURE (Valid for 6 months from date signed)

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, _____, by _____.

Signature of Notary Public – State of _____

Print, Type or Stamp Commissioned Name of Notary Public

Personally Known OR Produced Identification - Type: _____

TO WHOM IT MAY CONCERN:

I, _____, hereby authorize and request every person, firm, officer, corporation, association, organization or institution having control of any documents, records or other information pertaining to me to furnish the original or copies of any such documents, records or other information to the Florida Office of Financial Regulation or any of its authorized representatives for purposes of inspection or copying pursuant to Florida Statutes.

SIGNATURE (Valid for 6 months from date signed)

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, _____, by _____.

Signature of Notary Public – State of _____

Print, Type or Stamp Commissioned Name of Notary Public

Personally Known OR Produced Identification - Type: _____