



BROKER'S AUTHORIZATION AND QUALITY CONTROL RELEASE

The undersigned, in connection with an application for a broker approval, hereby agree(s) and authorizes MidCountry Bank, its agents, successors or assigns to obtain a consumer credit report. It is understood that a photocopy of this Authorization shall be considered the same as if it were the original and carries my full authorization to release the information requested.

RIGHT TO FINANCIAL PRIVACY ACT CERTIFICATION

The Department of Housing and Urban Development certifies, in compliance with the Right to Financial Privacy Act of 1978, that in connection with this request for access to financial records, it is in compliance with applicable provisions of said Act.

Company Name: _____

Name: _____

Signature: _____

Title: _____ Date: _____

FAX CONSENT CERTIFICATION

By providing the following fax number(s) below, authorization is given to receive faxes sent by or on behalf of MidCountry Bank (and its subsidiaries and affiliates). This consent remains in effect until such consent is withdrawn in writing.

Signature: _____

Title: _____

Date: _____