

**CUSTOMER CONSENT AND AUTHORIZATION
FOR ACCESS TO FINANCIAL RECORDS DURING SUPERVISION**

I, _____, having read the explanation
(Name of Customer)
of my rights which is attached to this form, and having been convicted in the United States District Court, and in accordance with 18 U.S.C. § 3603, I am required to provide complete disclosure of all assets I own or control, fully describe my financial resources to the United States probation officer for the purpose of probation or supervised release supervision ordered at sentencing, and hereby authorize the

EQUIFAX

(Name and Address of Financial Institution or Credit Agency)

to disclose the following financial records:
CREDIT REPORT

to _____, an officer of the
(Name of Probation Officer Allowed Access)

United States District Court for the _____ District of South Carolina
(Name of District Court)

for the purpose of keeping the probation officer informed concerning compliance with any condition of supervision, including the payment of any criminal monetary penalties imposed by the court, and that this financial information may be transferred to the financial litigation unit of the United States attorney's office for the purpose of the collection of financial penalties.

I understand that this authorization may be revoked by me in writing at any time before my records, as described above, are disclosed, and that this authorization is valid for 90 days from the date of my signature. I understand further that my authorization cannot be required as a condition of my doing business with the above-named financial institution.

(Date)

(Signature of Customer)

(Address of Customer)

(City/State/Zip Code)