

I (we) authorize Janssen Accounting & Tax Service, Inc. to provide copies of Financial Statements and/or Income Tax Returns for me and or my company to my financial institution and/or insurance companies when those companies request it from them.

Please check all boxes that apply

- | | | |
|--|---|---|
| <input type="checkbox"/> First National Bank | <input type="checkbox"/> F & M Bank | <input type="checkbox"/> Community First CU |
| <input type="checkbox"/> Farmer's State Bank | <input type="checkbox"/> Chase | <input type="checkbox"/> Baylake Bank |
| <input type="checkbox"/> First State Bank | <input type="checkbox"/> M & I Bank | <input type="checkbox"/> Premier Comm. Bank |
| <input type="checkbox"/> Associated Bank | <input type="checkbox"/> Intl Bank of Amherst | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Hometown Bank | <input type="checkbox"/> Portage County Bank | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Wolf River Community Savings Bank | <input type="checkbox"/> Fox Communities CU | |

This authorization is continual and remains in effect until revoked in writing by the client. This authorization will be kept at Janssen Accounting & Tax Service, Inc.'s office in your file.

Signature	Title	Date