

Good Time Outdoors Inc.
dba/ CORE® Rifle Systems

4600 West Hwy 326

Ocala, FL 34482

Tel # (352)401-9070 / Fax # (352)401-9667

Authorization to Release Information

_____ Hereby authorizes _____

(Name of Company as it appears on account)

(Bank Name)

Located at the following address _____

(Physical address of the applicant's bank)

To release to **Good Time Outdoors Inc. (dba CORE® Rifle Systems)** any and all information they may request from _____

(Bank Name)

Regarding the following account number(s): _____

And to disclose to **Good Time Outdoors Inc. (dba CORE® Rifle Systems)** any and all other information they may request about above said company and its banking relations with your bank.

Bank Contact: _____ Phone: _____ Ext: _____

Fax: _____

Authorized Signature of applicant: _____

Name (print): _____

Title: _____

Date Signed: _____