

H. Thomas Moran II, Receiver
For LifeTime Capital, Inc.

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AUTHORIZATION

Date: _____, 200_____

By signing below I voluntarily give my consent to the LifeTime Capital, Inc. Receiver's office to communicate with, either verbally or in writing, and to release any and all information regarding my LifeTime investment accounts to _____.

Investor's Signature

Investor's Name- Please Print or Type

Investor's Address

Investor's Phone

State of _____)

)

County of _____)

BEFORE ME, the undersigned authority, on the ____ day of _____, 200____, personally appeared _____ who executed the foregoing instrument and acknowledged to me that ____ (he/she) executed the same as ____ (his/her) free act and deed.

[SEAL]

Notary Public

My Commission Expires: _____

My Commission #: _____