



TEXAS CERTIFIED CAPITAL COMPANY AUTHORIZATION TO INVESTIGATE

To be completed by each Applicant, principal and/or key employee.

Name of Proposed Certified Capital Company ("CAPCO")

I understand that the Texas Comptroller of Public Accounts may conduct checks into my background, credit experience, and related matters in conjunction with an application for Certified Capital Company status to be issued to:

NAME OF APPLICANT

Individual's Name

Title

Signature

Social Security Number

Date of Birth

Date