

## **UTILITY RELEASE OF INFORMATION**

Date	

This serves as A	uthorization to Release Util	ity Information:						
T0: (Company Requesting Information)				FROM: (Company Releasing Information)				
(			Them (company) receasing manuacity					
Authorized Signature		Printed Name			Title			
Phone Number			Email Add	trace				
Thore Number			Lillali Add	11633				
For locations list	ted below:							
Address	City		State	Zip	Account Number			
Address	City		State	Zip	Account Number			
				7.				
Address	City		State	Zip	Account Number			
Address	City		State	Zip	Account Number			
The leaf five year	us of woods biotomy includin		datas as		n vete elece billing en evet			
The last two years of usage history, including meter reading dates, consumption, rate class, billing amounts, and other relevant information for the aforementioned customer and addresses listed will be provided.								
	ORMATION SHOULD BE SE							
THE ABOVE IN	ORMATION OFFICED BE DE	INT TO THE ATTE		1.				
Requestor Name								
Phone Number			Email Ad	droos				
Phone Number			Email Ad	aress				
PLEASE RETURN THE COMPLETED AND SIGNED FORM TO YOUR RPU COMMERCIAL ENERGY ADVISOR:								
	Alex Pruett (507) 280-1543	Alex Pruett Caleb Sc (507) 280 1543 (507) 280						
	apruett@rpu.org				(507) 280-1607 lcook@rpu.org			
	ap. 451.6. pa.o. 9	33311331@1	r 3.0.9					

THIS AUTHORIZATION EXPIRES ONE HUNDRED TWENTY (120) DAYS AFTER IT IS SIGNED