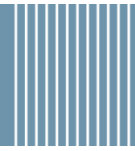


# AUTHORIZATION TO RELEASE CERTIFICATION INFORMATION



## STATEMENT

I, \_\_\_\_\_, hereby authorize the National Investor Relations Institute (NIRI) and the Certification Council to provide \_\_\_\_\_ with the following certification information, in writing, orally, electronically or in any other available form.

Certification Type \_\_\_\_\_

Effective Date \_\_\_\_\_

Expiration Date \_\_\_\_\_

Current Status       Active                       Inactive

Other Information       Examination Score     Revoked               Never Held an IRC certification

I hereby release, discharge and hold harmless NIRI, The Certification Council, and their officers, members, volunteers, employees, directors and agents and assigns from any and all liabilities that may arise directly and indirectly now and in the future from releasing my information.

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Signature

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Date

Please print and email this form to [certification@niri.org](mailto:certification@niri.org) or mail it to:

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Alexandria, VA 22314