CONSENT TO RELEASE BANK/FINANCIAL RECORDS
(Pursuant to Section 609(e) of the Fair Credit Reporting Act (15 U.S.C. §1681g), California Financial Code Sections 4002 and 22470, Civil Code Section 1748.95, and Penal Code Section 530.8)

Date:	
An Identity Theft Victim is permitted to authorize your release Officer. I am designating Detective Erica Escalante # 4628 of the information and documents. I, hereby, authorize the release of Enforcement Officer, Detective Erica Escalante: 251 South C S (805) 385-7661 for criminal investigation under Oxnard Police Department Report Number	he Oxnard Police Department as the recipient of all account all account documents and information to the Law Street, Oxnard, CA 93030; Erica.Escalante@OxnardPD.org;
I, am requesting to (Name of Account Holder)	hat you provide Detective Escalante
with copies (paper, fax, or digital) of the following records relat	-
Bank/Financial Institution:	
Account number(s):	
Time frame:	
(1) Bank/financial statements that show a record of the a	account activity;
(2) The record of the deposits (as payments/credits) to the	ne account including deposit slips:
(3) The record of the withdrawals (as charges/debits) from	om the account including withdrawal slips;
Other:	·
By this consent I authorize your institution to give copie I personally made this request in your presence. Also records and retain such copies.	1 0
I am giving this written permission to the above na promises of any kind.	med peace officer voluntarily and without threats or
I understand that I have the right at any time to revoke Information and authorizing signature. A copy of my po	
ACCOUNT HOLDER	
(Signature)	(Printed Name)
	(Date of Birth)
(Address)	(Social Security Number)
(Phone number)	(Bootal Security Palifoot)