

**AUTHORIZATION AND CONSENT FORM**

Authorization for Disclosure of Information Held by Service Providers, Carriers, Other Sellers of Travel, The Airlines Reporting Corporation (ARC) or International Association of Travel Agents Network (IATAN), and any Business Records maintained by or on behalf of

\_\_\_\_\_  
(Seller of Travel Name)

at any bank or financial institution.

\_\_\_\_\_  
irrevocably consents to the California Attorney,

(Seller of Travel Name)

General, District Attorney of any County within California, or their authorized representatives obtaining any information related to an investigation of a Seller of Travel's compliance with Business and Professions Code § 17550.21.

The consent shall be signed by all owners, partners, or corporate officers listed in the registration application.

I/We hereby consent to the disclosure of information maintained by above referenced entity(ies) and declare under penalty of perjury under the laws of the State of California that all of the information provided in answers on the Seller of Travel Application dated \_\_\_\_\_ is true and correct.

_____ Typed Name	_____ Position	_____ Signature	_____ Date
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