

Pension and Retirement Plan Information Release Authorization

To: **(Corporation)**
(Address)

Re:

Ronald J. Webber
 44 Predicament Place
 Estrangement, NJ 08837
 S.S.#: 123-45-6789

This will authorize you to release to the firm of *Romanowski Law Offices*, or its designated representative, any information they may request concerning the status of my interest in or status in the company pension and retirement plan.

 Ronald J. Webber

Dated: _____

Acknowledgment

STATE OF NEW JERSEY :
 SS :
 COUNTY OF _____:

I certify that on **(Date)**, **(Name of Responding Party)** personally came before me, a Notary Public of the State of New Jersey, and acknowledged under oath, to my satisfaction, that he/she is the person named in and who personally signed this Authorization.

 Name of Notary Public
 My Commission Expires: _____

Date: _____

ROMANOWSKI LAW OFFICES

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