

THIS IS A SAMPLE FORM

(2 pages to be printed front and back)

**APS AGENCY LETTERHEAD
OFFICIAL REQUEST FOR CUSTOMER RECORDS**

Pursuant to Gramm-Leach-Bliley Act (GLBA)(15U.S.C.§6802(e)(8); and 15 U.S.C. §6802(e)(3)(B))
and State Law_____.

I, _____, an Adult Protective Services (APS) Investigator,
operating under the laws of _____, am conducting an authorized investigation of
alleged financial exploitation of an older person (vulnerable/dependent adult).

I hereby request records, to be sent securely, for all accounts relating to: _____

[Full name; last four digits of Social Security number, date of birth; account owner, account number or
other unique identifier], including but not limited to:

- Statements for ALL accounts, including but not limited to, checking, savings, money market, certificates of deposit, investments, insurance, other holdings.
- Copies of all deposits and withdrawals from the account(s), including, but not limited to, checks [front and back] and any offsets, ACHs, wires, transfers, instructions, securities/certificates and transaction requests.
- Account Opening and closing documentation, including but not limited to, New Account Forms for all accounts, including view/read only accounts, insurance applications, any Trusted Contact Person(s),¹ all Power of Attorney documents and signature cards.
- Statements for any loans, lines of credit, credit cards, pledged assets and copies of any cash advances or cash advance recalls.
- Other (if not included in the above): _____.

To facilitate a timely investigation, please provide these records on or before_____.

I pledge to securely safeguard all client and related financial institution information provided in order to protect the customer's and institution's privacy.

Signature

Phone

Printed Name

Email

Title

Address

Agency

Address

¹ Pursuant to the Financial Industry Regulatory Authority (FINRA) Rule 4512

Gramm-Leach-Bliley Act

15 U.S.C. §6802 - Obligations with respect to disclosures of personal information

(e) General exceptions

Subsections (a) and (b) of this section shall not prohibit the disclosure of nonpublic personal information—

(3)(B) to protect against or prevent actual or potential fraud, unauthorized transactions, claims, or other liability;

(8) to comply with Federal, State, or local laws, rules, and other applicable legal requirements; to comply with a properly authorized civil, criminal, or regulatory investigation or subpoena or summons by Federal, State, or local authorities; or to respond to judicial process or government regulatory authorities having jurisdiction over the financial institution for examination, compliance, or other purposes as authorized by law.

Adult Protective Services (APS) is properly authorized, under the state statute cited below, to carry out civil investigations of elder/vulnerable adult abuse, neglect and financial exploitation.

SAMPLE STATE STATUTORY LANGUAGE

Note: You may want to insert your state's authorizing statute language here if helpful. Include the actual statutory language and citation.