

Date:

To Whom It May Concern:

_____ authorize EQUIFAX to obtain
COMPANY NAME

credit information as may be required to conduct a credit investigation

and authorizes _____
FINANCIAL INSTITUTION

to reveal required account information for DHL Global Forwarding
(Canada) Inc.

Bank Account No: _____

Signature: _____
MUST BE OWNER OR AUTHORIZED OFFICER OF COMPANY

Title: _____

Thank you.

Sincerely yours,
