
Financial Institution Authorization Release

I authorize the Law Society of Alberta ("LSA") to obtain bank account records and information regarding

(name of law firm)

directly from my Financial Institution when the LSA conducts an examination, review, audit or investigation in accordance with the *Rules of the Law Society of Alberta*, as amended from time to time (the "Rules").

I authorize my Financial Institution to release such bank account records and information to the LSA as and when requested by the LSA.

Name: _____

Name of Law Firm: _____

Date _____ Signature _____

The information provided in this form will be used by the Law Society of Alberta for one or more purposes contemplated by the *Legal Profession Act*, the Rules of the Law Society, the Code of Conduct, or a resolution of the Benchers and will be accessible to all departments of the Law Society, including the Alberta Lawyers Insurance Association. The information may be used or disclosed by the Law Society of Alberta, now or in the future, for regulatory purposes, including Law Society of Alberta investigations and proceedings. We may contact you to obtain additional information, or to obtain clarification on the information you provided. Should you have any questions about this, please contact the Privacy Officer at 403-229-4700.