



ACCOUNT AUTHORIZATION FORM

This form gives us permission to share your account information with another person.

AT&T takes its obligations to protect the privacy of its customer information very seriously. Under federal privacy law, it is our duty to protect your Customer Proprietary Network Information (CPNI). AT&T's Privacy Policy bars us from sharing your confidential information with others without your authorization. You don't have to grant authorization, and your decision to provide or withhold it won't affect your service. For more information about AT&T's Privacy Policy, please go to <https://about.att.com/csr/home/privacy.html>.

By completing and returning this form, you authorize AT&T to share your confidential information and CPNI, including your confidential account history, billing information, and call detail records with the Authorized Person you identify below. To prove that it's you granting permission, your signature at the bottom of the form must be notarized. If that's too difficult or expensive, let us know and we'll work with you on another way to authenticate your signature or to reimburse any notary fee that's a hardship.

If you authorize AT&T to share your confidential information and CPNI, please complete and return this form to Legal Department – Notice of Dispute, AT&T, 208 S. Akard, Office #2900.13, Dallas, TX 75202. Your authorization for AT&T to share your data with the Authorized Person listed below is valid until you affirmatively change or withdraw this authorization by written notice to the address above.

* Asterisk indicates required information. This information is required to ensure the security of your information.

AT&T Customer:

* Billing Name (First and Last): _____
* Account Number: _____
* Billing Address: _____
City: _____ State: _____ Zip Code: _____
* Wireless Number: _____
Email Address: _____@_____

This information may be used to update your account information.

Authorized Person:

* First and Last Name: _____
Company Name (if applicable): _____
* Address: _____
* Contact Telephone Number: _____
Email Address: _____@_____

AT&T Customer Signature

Date

Subscribed and sworn to before
me this _____ day of _____, 20____.

Notary Public