

TO: \_\_\_\_\_  
BANK NAME

FROM: \_\_\_\_\_  
CUSTOMER NAME

Dear Bank Officer or Representative,

As an officer or duly authorized representative of \_\_\_\_\_, I hereby request bank or credit information to be released to Diamond Materials, LLC, located at 242 N James Street, Newport, DE 19804. Please fax pertinent information to Diamond's fax # (302) 658-0684.

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SIGNATURE TITLE DATE