



COMED CUSTOMER INFORMATION RELEASE FORM

According to Illinois statute, 815 ILCS 505/2HH, ComEd must obtain a customer's consent for the "Release of Customer Information." Please provide the requested information and consent to Brad Perkins at:

Bradley R. Perkins
Exelon Business Services Company
10 S. Dearborn Street, Suite 4900
Chicago, Illinois 60603

This document must be notarized in order to allow ComEd to release Customer Information.

CUSTOMER INFORMATION (complete as much as known)	
Customer Name:	
Service Address:	
ComEd Account Number:	ComEd Meter Number:
RELEASE INFORMATION TO: RECORDS DEPOSITION SERVICE, INC., PO BOX 5054, SOUTHFIELD, MI, 48086-5054	
CUSTOMER AUTHORIZATION AND RELEASE (to be filled out and signed by ComEd customer) P: 248-357-3330 F: 248-357-3337	
I authorize ComEd to release my Customer record information for the identified accounts and meters to the above Requestor. I release ComEd from all claims, damages, or expenses of any kind resulting from unauthorized use of this information. I certify that I have the authority to release the information for this account.	
Customer Social Security Number: _ _ _ - _ _ - _ _ _ _	
Name of Authorized Customer (Please Print):	
Authorized Signature:	Date _ / _ / _