

## Addendum B AUTHORIZATION FOR ACCESS

|                                 | ion for the following named individual<br>I by Penn Records Management in the |                      |
|---------------------------------|---|----------------------|
| Account Name:                   | Account #:  |                      |
| Primary Contact:                | Tele. #   |                      |
| Cell Phone number for Emergency | Use Only:   |                      |
| Printed Name                    |   | Pass code (Optional) |
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| Original Authorization Add      | dition to Authorization   |                      |
| Voids Previous Authorization    |   |                      |
| Signature of Company Officer:   |   |                      |
| Position:                       | Date:   |                      |