

Quality Re-Verification



Complete all informational fields below. The completed form must be mailed and the \$30.00 fee enclosed **before** the request will be processed. Requests are completed within 3-5 business days of receipt.

Requests must be mailed to:

Fulfillment Operations
First Horizon Bank
3451 Prescott
Memphis, TN 38118

Make check payable to First Horizon Bank

Customer Information (please print):

Name on Account:	
Social Security Number:	
Account Number:	
Account Number:	
Account Number:	

I authorize First Horizon Bank to verify financial information on the above account(s) to the Requestor identified below. Verification of financial information may include the current balance, open date, and account activity as detailed on account statements provided for verification.

Signature of account holder: _____ **Date:** _____

Documentation to include:

- Copy of statement(s) to be validated as accurate.

Requestor Information (please print):

Requestor Name:	
Company Name:	
Phone Number:	
Fax Number:	
Email Address:	