



**CISCO SYSTEMS, INC.**  
**LETTER OF AUTHORIZATION (LOA) - CUSTOMER CONSENT**

This document authorizes Cisco to release the specific customer information described in section 2 below to the authorized parties identified in Section 3 below.

**1. Authorization to Release Information:**

Please sign in the spaces below to authorize Cisco to release your information.

Company Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**2. Information to be Released:**

Please specify the information to be released. The Confidential Information to be disclosed under this LOA is described as follows:

Type of Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3. Authorized Parties:**

Please identify the person(s) or company that is to receive the information mention in section 2 above if different then the Company making the request.

Company Name: \_\_\_\_\_

Individual: \_\_\_\_\_

Address: \_\_\_\_\_

Phone or email: \_\_\_\_\_

**4. Validity Period:**

The validity period of this authorization is for six months from the date specified in Section 1 above.

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**(email version)**

This document authorizes Cisco to release the specific customer information described in section 2 below to the authorized parties identified in Section 3 below.

***1. Authorization to Release Information:***

In order to authorize Cisco to release your information, please fill in the customer information below including customer name, contact, date and email address.

***2. Information to be Released:***

Please specify the information to be released. The Confidential Information to be disclosed under this LOA is described as follows:

This vendor is allowed to see a list of the equipment that is currently covered under a Cisco maintenance contract.

***3. Authorized Parties:***

Please identify the person(s) or company that is to receive the information. Please be as specific as possible and include the company name, contact, address, phone number and email address.

***4. Validity Period:***

The validity period of this authorization is for six months from the date specified in Section 1 above.