



Data Protection

# AUTHORIZATION TO DISCLOSE ACCOUNT INFORMATION

*Frequently  
Asked  
Questions*

**1 Q: What is the purpose of form A014 (Authorization to Disclose Account Information)?**

**A:** This form provides us with information necessary to help validate your identity when you call. We will use the secret control question that you designate in Section 3 as one of the measures used to help validate that the person we are speaking to on the phone is you. Additionally, your secret control question will be used as one of the methods to validate your online identity during your future web based account setup when this feature becomes available from PRCUA.

**2 Q: Do I need to complete this form?**

**A:** YES. PRCUA is proactive in protecting your privacy. This form is a necessary part in properly controlling the release of information to you or other third-party individuals that you may designate as authorized to help you in administering your account.

**3 Q: What if I refuse to complete this form?**

**A:** The information that you provide on form A014 will help us validate that it is you on the other end of the phone or it will allow us to provide information about your account to any third-party individuals that you have designated in Section 4. Without this form, we may not be able to release any information to the caller if we cannot properly validate the identity of the caller.

Your application will still be processed. However, any release of information for this account may be limited to the form of mailings to your current postal address on file with no account disclosure to any individuals except yourself.

**4 Q: What is required to be completed on this form?**

**A:** All requested fields of information in Sections 1 and 2 must be completed, with the exception of the certificate number for new applications. In Section 3, you must also select one of the predefined secret control questions and provide the answer in the boxes following the question, or you may write your own custom secret control question and provide its answer. Finally you must sign and date the form in Section 5. The completed form should be sealed in the provided envelope and mailed to:

**Member Services**  
**Polish Roman Catholic Union of America**  
**984 N Milwaukee Ave**  
**Chicago, IL 60642-4101**

For new applications, simply complete the form, enclose and seal it in the provided return envelope, and present it to your sales representative. They will properly forward it with your new application for processing.

## QUESTIONS?

Contact us at

**1-800-772-8632**

Monday - Friday  
8:15am - 4:00pm (CST)

- or -

Visit us on the  
Internet at

**[www.PRCUA.org](http://www.PRCUA.org)**



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# AUTHORIZATION TO DISCLOSE ACCOUNT INFORMATION

*Frequently  
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*...continued*

**5 Q:** *Why do I have to provide a secret control question?*

**A:** When you call us regarding your account, we will ask you the secret control question that you specified in Section 3 and anticipate the response to the question to match your specified answer. This is one of the methods we will use for protecting the release of your information with phone calls.

**6 Q:** *What is Section 4 used for and why would I want to authorize any third-party individual with access to my account information?*

**A:** Section 4 allows you to specify which individuals you authorize us to release information to regarding your account or transaction history. You may want your spouse, a family member, or financial advisor to be included on this list of authorized individuals if you want them to help you with the administration of your account. Additionally, you can allow your PRCUA sales representative (deputy/agent) to have access to your account information and transaction history so he/she can effectively help you with protecting your financial future through the use of PRCUA's financial products and services.

**7 Q:** *If I authorize the release of my account information to third-party individuals, can they make changes or withdraw any money from my account?*

**A:** Third-party individuals to whom you have authorized the release of account information to will ONLY be able to receive account information. Any changes to the account and distribution of funds will still require your written approval with the required PRCUA form(s).

**8 Q:** *Can I change my secret control question or the third-party individuals that I have made or is my selection permanent?*

**A:** You may change your secret control question and answer or authorized third-party individuals at any time. Simply submit another A014 form with your new information. If you want to remove previously authorized third-party individuals, simply do not include them on the new A014 form. Upon receipt of your newly completed A014 form at the PRCUA home office, any previous secret control question and answer and authorized third-party individuals on file for your record will be removed and the new A014 form's secret control question and answer and authorized third-party individuals will become effective.



# AUTHORIZATION TO DISCLOSE ACCOUNT INFORMATION

The Polish Roman Catholic Union of America is a fraternal benefit society that has always been committed to protecting your personal, financial and medical information. Access to your account information and transaction history is limited to those PRCUA employees who are working with your file. Additionally, if we are required to disclose information in connection with civil or criminal litigation, we must comply, but such instances are exceedingly rare. There are no affiliated financial institutions or third-party non-affiliates which have access to your non-public personal account information or transaction history, except pursuant to your written authorization.

**Instructions:**

To help PRCUA with validating your identity when you call us, please complete Sections 1 and 2 with the account information requested and select a secret control question in Section 3. Additionally, in Section 4 you can specify which third-party individuals are authorized to receive information about your account and the transactions relating to your account activity. **Sections 1, 2, 3, and 5 are required. Section 4 is optional.**

Your authorization will become effective when the PRCUA Home Office receives this completed form. At any time, you may change your secret control question and answer or modify the third-party individuals that are allowed access to your account information and transaction history by completing and submitting a new A014 form to the PRCUA Home Office. **The authorization will apply only to the account(s) specified on this form.** If this authorization is completed with a new application, then the account number should be left blank. PRCUA assigns the account number when the certificate is issued.



**This form should be completed ONLY by the owner.**

For additional information, please contact us at ☎ 1-800-772-8632, or visit our website at 🌐 [www.prcua.org](http://www.prcua.org).

**1. ACCOUNT INFORMATION** Required  
(Leave Blank for New Applications)

CERTIFICATE (POLICY) / ACCOUNT NUMBER(S)	CERTIFICATE (POLICY) / ACCOUNT NUMBER(S)	CERTIFICATE (POLICY) / ACCOUNT NUMBER(S)

**2. OWNER INFORMATION** Required

FIRST (MI) LAST NAME	DATE OF BIRTH (MONTH/DAY/YEAR)
STREET ADDRESS / CITY, STATE ZIP CODE	
HOME PHONE NUMBER	WORK PHONE NUMBER
EMAIL ADDRESS	

**3. SECRET CONTROL QUESTION** Required

To help PRCUA employees with validating your identity when you call us, we will ask you your selected secret control question and anticipate the answer you provide in the boxes following the selected secret control question. You may select one of the predefined questions or you may enter your own custom question in order to provide a higher level of security. **Please select only ONE secret control question located on page 2.**

(continued on next page)

3. SECRET CONTROL QUESTION (continued from page 1)

Required

- What city were you born in? \_\_\_\_\_
- When is your wedding anniversary? (MONTH/DAY/YEAR) \_\_\_\_\_
- What is your favorite sports team? \_\_\_\_\_
- What is your favorite color? \_\_\_\_\_
- Who is/was your favorite pet? \_\_\_\_\_
- What was the make and model of your first car? \_\_\_\_\_
- I want to enter my own custom secret control question:  
 \_\_\_\_\_  
 (ENTER YOUR OWN SECRET QUESTION)  
 \_\_\_\_\_  
 (ENTER YOUR OWN SECRET ANSWER)

CUSTOM

4. AUTHORIZED THIRD-PARTY INDIVIDUALS

Optional

You can specify third-party individuals, such as a family member, spouse or personal financial advisor, who are authorized to receive information about your account and the transaction relating to your account.

NAME OF AUTHORIZED INDIVIDUAL(S)

- 1: \_\_\_\_\_ 2: \_\_\_\_\_
- 3: \_\_\_\_\_ 4: \_\_\_\_\_

You can also authorize your current PRCUA sales representative (deputy/agent). Allowing your current PRCUA sales representative (deputy/agent) with access to your account information and transaction history will provide them with information necessary to effectively provide you with future assistance.



*PRCUA sales representatives are bound by the terms of the PRCUA Privacy Policy and are authorized to use your account information only for servicing your financial protection with the use of PRCUA offered financial products/services.*

- I authorize the PRCUA sales representative below to have access to my account information:

\_\_\_\_\_  
PRCUA SALES REPRESENTATIVE (DEPUTY/AGENT) NAME

5. SIGNATURE

Required

 \_\_\_\_\_  
SIGNATURE OF OWNER

 \_\_\_\_\_  
SIGNATURE DATE