

# AUTHORIZATION FOR RELEASE OF FINANCIAL INFORMATION

ON THIS \_\_\_\_\_ DAY of \_\_\_\_\_ 20\_\_\_\_, intending to be legally bound and in consideration of the sum of Ten Dollars (\$10.00) paid by Samuels & Associates, to me/us, receipt of which is hereby acknowledged, I/we irrevocably authorize Samuels & Associates and their authorized agents and employees to obtain, at it expense, from any credit reporting agency all records, histories, summaries, reports, investigations and any other information (all herein referred to as Information) pertaining to my/our personal credit history including matters for which I am/we are or have been individually or jointly responsible as a guarantor.

I/we also authorize the release of information pertaining to my/our bank account at \_\_\_\_\_, account number (s) \_\_\_\_\_ . I/we herby forever release, remise and discharge Samuels & Associates, from any claims, suits, liabilities, actions or contracts or warranties which may arise driectly or indirectly, remotely or proximately from Samuels & Associates' use or obtaining of any of the foregoing Information. However it cannot provide or show me a copy of any Information obtained nor can it discuss any specific information or items. Samuels & Associates shall use all reasonable efforts to maintain the confidentiality of all Information received in accordance with this Authorization. A copy fo this Authorization shall be as valid as the original. I/we have read and executed this Authorization on the date first above recited.

SIGNED: \_\_\_\_\_ PRINTED LAST NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ PRINTED FIRST NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PRINTED MIDDLE NAME: \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_ SUFFIX (JR., SR., ETC.): \_\_\_\_\_

CURRENT RESIDENTIAL ADDRESS: \_\_\_\_\_

FORMER RESIDENTIAL ADDRESS: \_\_\_\_\_

## SECOND PARTY OR SPOUSE, IF APPLICABLE (PLEASE CIRCLE ONE)

SIGNED: \_\_\_\_\_ PRINTED LAST NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ PRINTED FIRST NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PRINTED MIDDLE NAME: \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_ SUFFIX (JR., SR., ETC.): \_\_\_\_\_

CURRENT RESIDENTIAL ADDRESS: \_\_\_\_\_

FORMER RESIDENTIAL ADDRESS: \_\_\_\_\_

**SAMUELS & ASSOCIATES**