

AUTHORIZATION

TO DISCUSS AND NEGOTIATE DEBT SETTLEMENT

Debtor Name: _____

Debtor Address: _____

Date of Birth: _____

Social Security #: _____

I HEREBY AUTHORIZE THE FOLLOWING CREDITOR/ DEBT COLLECTOR:

TO RELEASE ALL DEBT ACCOUNT INFORMATION TO MY AGENT,
ATTORNEY MARK S. BUCKLEY FOR THE PURPOSE OF NEGOTIATING A
SETTLEMENT AGREEMENT.

Signature of Debtor

Date: _____