

Authorization to Contact Creditors

Client Name: _____

Address: _____

City, State, Zip: _____

Credit Service Co. _____

I, the undersigned, hereby authorize _____ to contact my creditors on my behalf and to open up channels of negotiation and payment plans with them.

I further authorize my creditors to release my information to
_____.

This letter may be copied and presented to creditors as proof of my consent.

Signature _____ Date _____

Witness _____ Date _____