

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I give my permission for you to release any and all information to Geneva Properties, LLC in reference to my credit, any mortgages, liens, judgments, bankruptcy processes, or medical information.

REGARDING PROPERTY: _____

SIGN:

BORROWER _____

SIGN:

CO-BORROWER _____

Borrower(S) _____

Address _____

City/St/Zip _____

Bus. Phone _____

Res. Phone _____

S.S. # _____

Additional Information: _____
