

Berglas & Associates
P. O. Box 71321, Knoxville, TN 37938
Bus. (865) 219-9559 Fax (865) 688-3045
E-mail: Joseph@BerglasAndAssoc.com

AUTHORIZATION TO RELEASE INFORMATION

ACCOUNT: _____

ACCT. #: _____

RE: _____

ATTN: _____

We have been retained by the below to manage their outstanding debts. Funds will be sent immediately to settle the above debt.

Since there are limited funds with which to settle, priority is given on a first-come first-served basis, therefore, please contact us as soon as possible.

Sincerely,

Berglas & Associates

The undersigned authorizes Berglas & Assoc., to settle the above debt:

Authorized Signature

Social Security Number

Please Print Name

Date