

Borrower Authorization

The undersigned hereby authorize(s) _____,
their agents, successors and assigns to provide statements and information for the
account in the name of _____,
ss# _____,
Account # _____, to

Law Office of Melissa Tzanoudakis, PLLC

111 Main Street

PO Box 563, MA 0146

Pepperell, MA 01463

Tel 978-433-6271, Fax 978-743-6869

for the date requested: _____ by *Law Office of Melissa Tzanoudakis, PLLC* and to otherwise authorize *Law Office of Melissa Tzanoudakis, PLLC* to communicate with *said companies*, their agents, successors and assigns about this account. A photocopy or facsimile of this authorization will be as effective as an original.

Borrower:

Date:

Borrower:

Date: