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## **SELLER'SAUTHORIZATION FORM**

I/We\_\_\_\_\_do hereby

authorize the Law Offices of Medley & Associates, LLC to

obtain information regarding my account.

Company\_\_\_\_\_ Phone \_\_\_\_\_

Account number \_\_\_\_\_

Company\_\_\_\_\_ Phone \_\_\_\_\_

Account number\_\_\_\_\_

Please accept this as authorization to release information on my account.

Signature