

TCI Services Group, Inc.

Authorization to Obtain Credit Report

(Please print legibly on this form)

I, _____ with _____, Date of Birth _____,
Please Print (First, Middle, Last Name) Social Security No. D.O.B.

Resident of _____
Resident address City State Zip

and employed at _____
Employer Name (please print) AND Employer's Address

_____, authorize TCI Services Group, Inc.
CONTINUE WITH → Employer's Address, City State Zip

and its agents (any assignees to include financial institutions) to retrieve copies of my credit report from any and all credit reporting agencies such as Equifax, Experien, Trans Union, and others for the purposes related to my credit verification, rental, credit or security loans, employment, or any others in which I will be involved with MasterCreditRepair.Net or its subsidiaries MasterCreditRepair.net Inc., its agents, representatives, assignees, etc.

With my signature below, I also authorize the verification of my employment history for all relevant information pertaining to my credit wordiness and ability to pay the amount as it would state on any future contract(s).

The charge to obtain Tri-Merged credit report with score is \$45.00 for single (one Person) \$50.00 for married (couple/two People) which needs to be paid along with this authorization form and prior to obtaining the credit report.

I hereby ratify and confirm to all that reflected above as my true agreement.

IN WITNESS WHEREOF, I have set my hand and seal this _____ day of _____, 20____.

Signed, Sealed and Delivered
in the presence of:

Signature of Authorizing Party, Date

Driver Lis. Or other Identification No.

WITNESS

WITNESS