

LIMITED POWER OF ATTORNEY

Authorization to Communicate with Creditors and Collection Agencies for Settlement of Accounts

I, _____ grant permission to and hereby appoint SFL Notary & Credit Solutions (hereinafter, "SFLNCS"), for the purpose of and to act as an attorney-in-fact in performing the following actions on my behalf and request that recipient comply with such authorization:

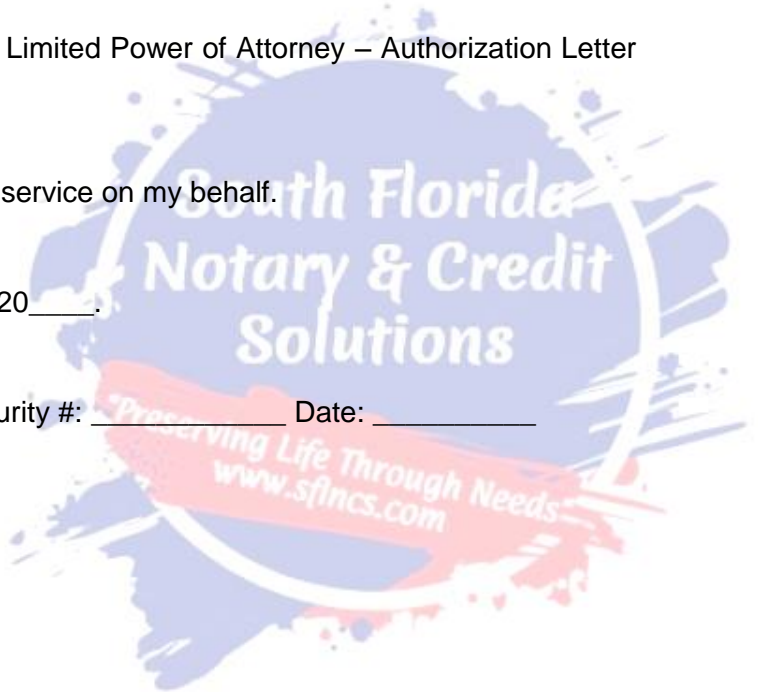
1. To communicate with banks, creditors, financial institutions, collection agencies, or their agents and assigns, and all other entities and individuals involved with my debts and credit issues.
2. To obtain records, debt validations, and support for the debts allegedly owed by the undersigned. SFLNCS is authorized to request and receive confidential credit and account information from creditors, credit reporting agencies, collectors and other third parties involved with my debt and credit issues.
3. To communicate, validate, negotiate, restructure, resolve and settle my debts, with all settlements subject to my final approval.

I further authorize SFLNCS to release a copy of this Limited Power of Attorney – Authorization Letter to any of the above-described parties.

Be advised that SFLNCS is not authorized to accept service on my behalf.

Executed on this _____ day of _____, 20_____.

Client: _____ Social Security #: _____ Date: _____



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