

Supplemental Authorization for Release of Records

This authorization is provided in connection with a consumer report or investigative consumer report ("background check") that may be conducted by [REDACTED] at the request of [REDACTED]. This authorization is a supplement to any previous disclosures, notices and authorizations obtained by [REDACTED] in compliance with the Fair Credit Reporting Act (FCRA) and applicable state laws.

I, **Mark Adrian Sison**, hereby authorize, any court, law enforcement agency, school, college, university (public or private), employer, or other record-holding agency to furnish any and all background information requested by [REDACTED], or another organization acting on behalf of [REDACTED], to the extent permitted by law. These records may include, but are not limited to, employment, education, professional licensure or certification, criminal history, civil court records, driving records, and/or any other public records.

I agree that a facsimile ("fax"), photographic or electronic copy of this Authorization shall be as valid as the original.



Name: Mark Adrian Sison
SSN: [REDACTED]
Date: 3/7/2023