



LETTER OF AUTHORIZATION

To Whom It May Concern:

I hereby authorize First Advantage to verify all information provided in my resume and application of employment, and to conduct enquiries as may be necessary, at their discretion. I authorize all persons who may have information relevant to this enquiry to disclose it to First Advantage. I release all persons from liability on account of such disclosure. I am willing that a photocopy of this authorization be accepted with the same authority as the original.

Consent And Authorization

I agree to provide my authorization per the to	erms of the above authorization. I Agree
First Name (given name) :	JANICE
Last Name (family name) :	ARCA
Maringan	

Signature

Date: Wed Feb 15 16:25:09 GMT 2023