Power of Attorney

To Obtain Consumer Report

To: Experian, Equifax, TransUnion **(Choose one or all)**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_,hereby appoint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as my agent to obtain the my consumer report. **(Choose one)**  This authorization expires on \_\_\_\_\_\_\_\_\_, \_\_\_\_, 20\_\_\_\_ **OR** shall remain in full force and effect until revoked by the undersigned by a written notice addressed to you and delivered to your main office.

Said agent is specifically authorized to request and obtain the my current consumer report upon request by providing identification as you require for verification of the agent’s identity.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature D.O.B. SS# Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

Authorized Agent identifying information:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name D.O.B. SS#

Sworn to me before this \_\_\_\_\_\_\_\_\_ day, \_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

Before me appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as identification or who is personally known to me.

Notary Public-State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My Commission Expires:

Commission Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_