

COIN GROUP BACKGROUND CONSENT FORM

I hereby give COIN Group LLC and its affiliates (hereafter referred to as "COIN Group") the authority to receive a criminal record on me. This consent is given in accordance with the income share agreement (hereafter referred to as "ISA") policy set forth by COIN Group. I understand that my record may reflect information that may cause COIN Group to reject my ISA application.

Please **PRINT** the following information:

Full Name: _____

P.O. Box: _____

Street Address: _____

City, State, Zip: _____

Sex: _____ Race: _____

Social Security #: _____ DOB: _____

Other names used: _____

Signature: _____ Date: _____

Attach Here....

**Copy of Driver's License or
State Issued Picture ID**

Notary: _____
(Include Notary Seal)

A criminal history record check has been conducted through the Georgia Crime Information Center (GCIC) on the above person, and no criminal history was located.

COIN GROUP AUTHORIZED REPRESENTATIVE

DATE

A criminal history record check has been conducted through the Georgia Crime Information Center (GCIC) on the above person, and the attached criminal history was located.

COIN GROUP AUTHORIZED REPRESENTATIVE

DATE