



AUTHORIZATION TO RELEASE INFORMATION

My signature below is authorization for you to release information regarding my credit, employment, banking, brokerage firms, and/or ratings to **First Mutual Mortgage Corporation** relative to my recent application for a real estate loan.

Reproduction of this authorization is to be considered as valid as the original.

Signed _____ Date _____

Signed _____ Date _____

This form must be signed and faxed to (706) 571-0538