STATE OF SOUTH CAROLINA	) AUTHORIZATION AND RELEASE
COUNTY OF	)
KNOW ALL MEN BY THESE PRESENTS that I (we), have engaged and employed <u>Gillis Law Firm</u> , <u>LLC</u> , as my (our) attorneys to facilitate the sale/refinance of my (our) property. I (we) hereby specifically authorize any of my (our) lenders, banks, mortgage companies, service providers, utility providers, homeowner associations, or any other entity to release any payoff statements, account activity statements, any payment histories, or any final bills or accounting information unto employees of <u>Gillis Law Firm</u> , <u>LLC</u> in regards to the sale/refinace. This information may be provided in any manner requested by <u>Gillis Law Firm</u> , <u>LLC</u> , including verbally, facsimile, or e-mail.	
Property Address :	
Signature	Signature
Print Name	Print Name

SSN

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