



Asset  
Recovery Inc

**Testimonial & Referral Release Form**

Testimonial Statement:

Thank you for all of your help into this matter  
that was to be take care of years ago -  
I hope this is our last contact, "But" if  
there comes another, I hope there is another  
fast outcome -

**Authorization and Release of Information**

I understand my testimonial as outlined above and made on behalf of Asset Recovery Inc. may be used in connection with publicizing and promoting The Company and/or as a referral for its services. I authorize The Company to use my name, brief biographical information contained herein, and the Testimonial as defined on this form.

Signature: George W. Scott

I have read the authorization and release information and give my consent for the use as indicated above.

Printed Name: GEORGE W. SCOTT

Address: Alkendale F3B-60  
Telephone: P.O. Box 1151 Fairfax - S.C. 29827

Email: N/A