



Asset
Recovery Inc

Testimonial & Referral Release Form

Testimonial Statement:

When I got this call, I didn't believe them, but I tried them and they kept their word. Thank a lot. Angela Taylor

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: Angela Taylor

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

Printed Name: Angela Taylor

Address: 246 Pioneer Drive

Telephone: 481-8412

Email: _____

