



Asset
Recovery Inc

Testimonial & Referral Release Form

Testimonial Statement:

Asset Recovery Inc. has handled my claim, in a very professional and effective manner. I would recommend their services to any person or persons. The Associates were always courteous and considerate towards me and my claim. All of my information has been kept private and confidential. I would refer to this corporation for any future needs.

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:

Linda F. Allen

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

Printed Name:

Linda F. Allen

Address:

*1824 Apt A Carson Rd.
Birmingham, AL 35215*

Telephone:

(205) 202-4546

Email: