



## CREDIT REPORT AUTHORIZATION

I hereby authorize AdvantEdge Advisors to obtain a personal credit report. I understand this information will be used in qualifying me for a possible business acquisition.

Full Name: \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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