

Prescribed Power of Attorney (to obtain a FREE credit report)

I/We,	(name/s and surname)	
with Identity numbers		
and residing at		
	(address)	

hereby appoints and consent to **ROMELA GOVENDER (NCRDC1262)**

of **FINESSE FINANCIAL SOLUTIONS**, to:

- request and receive from Compuscan/VCCB(Vericred)/Experian/Transunion my credit report in the same format as I/we would have received it had I/we requested it in person; and/or
- I/we consent that the Debt Counsellor may obtain my credit records from any / all registered credit bureaus and from any other registers which may contain any of my/our credit information.

Signed at	on this, theday of	20
Signature	Signature	
(Main Applicant)	(Spouse)	

OBTAIN YOUR FREE CREDIT REPORT AND FREE CONSULTATION NOW (2)

DEBT COUNSELLOR : ROMIE GOVENDER PHONE: 031 303 3690 /084 2502356 NCR REGISTRATION NUMBER: NCRDC1262 E-MAIL: <u>romie@debtfinesse.co.za</u> [1]