

Authorization and Release Information

By submitting my testimonial in response to this request, I confirm that I have read the authorization and release information and give my consent for the use as indicated below.

I understand my testimonial as submitted electronically (the "Testimonial") and made on behalf of Affair Recovery LLC (hereinafter called "The Company") may be used in connection with publicizing and promoting The Company. I authorize The Company to use the information submitted including my first name (pen-name or alias if requested), self-reported biographical information, and Testimonial.

I hereby irrevocably authorize The Company to copy, exhibit, publish or distribute the Testimonial for purposes of publicizing The Company's programs or for any other lawful purpose. These statements may be used in printed publications, on websites or in any other distribution media. I agree that I will make no monetary or other claim against The Company for the use of the statement.

I hereby hold harmless and release The Company from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Name: