

(08) 6102 1300
PO Box 98, Bull Creek, WA 6149
info@reclaimedwealthspecialists.com
www.reclaimedwealthspecialists.com



AUTHORITY TO RELEASE

I, _____ authorise
Reclaimed Wealth Specialists to act on my behalf and recover the sum of
approximately _____
to be released to *Reclaimed Wealth Specialists*.

I authorise *Reclaimed Wealth Specialists* and its staff to undertake any necessary searches and procedures to submit a refund claim for the above amount. I declare that I will provide authentic identification and other documents required to prove my ownership of these funds. I have read *Reclaimed Wealth Specialists* Terms & Conditions and agree to them.

Name: _____

Signature: _____

Date: _____

Please complete this Authority to Release document and email it to
info@reclaimedwealthspecialists.com or post to PO Box 98, Bull Creek, WA 6149.

This is a legal authority to act on your behalf once signed.