



UCC Refunding Service
WHERE YOUR MONEY MATTERS

AUTHORITY TO RELEASE

I _____ of _____ authorise
UCC Refunding Service to recover the sum (\$ _____) to be
released by cheque in the name of _____

I authorise **UCC Refunding Service** and its staff to undertake any
necessary searches & procedures required for the recovery of the above
funds.

I declare that authentic identification documents (s) have been provided
to **UCC Refunding Service** and I have read **UCC Refunding Service** Terms
& Conditions and agree to them.

Name (Please Print): _____

Signature: _____

Date: / /



123 Anywhere St., Any City



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hello@reallygreatsite.com



123-456-7890