



**ANGEL REFUNDS**  
Unleash Your Financial Wings

## AUTHORITY TO RELEASE

I \_\_\_\_\_ of \_\_\_\_\_ authorise  
**Angel Refunds** to recover the sum (\$ \_\_\_\_\_ ) to be released by  
cheque in the name of \_\_\_\_\_

I authorise **Angel Refunds** 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  
**Angel Refunds** and I have read **Angel Refunds** Terms & Conditions and agree  
to them.

Name (Please Print): \_\_\_\_\_

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

Date: / /

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