



**CREDIT REPORT AUTHORIZATION
BANKRUPTCY COUNSELING**

I hereby authorize Consumer Credit Counseling Services of Puerto Rico, Inc. (CONSUMER) to obtain a copy of my Credit Report from Trans Union as part of the process of receiving counseling prior to filing for bankruptcy, as required by the US Department of Justice.

I understand that I should provide this document to my attorney, as well as the Certificate and the Budget Analysis carried out by my counselor.

I certify that I have read and understand the above.

Signature: _____

Name (print): _____

Signature: _____

Name (print): _____

Date: _____