



CONSENT FOR COMMUNICATIONS

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Whether or not those laws would otherwise restrict Broker's and Associates' ability to communicate with you, by signing below, you agree that Broker and its Associates may contact you at the specified address, telephone number, fax number, e-mail address or other means of communication provided.

CONTACT INFORMATION

Name(s) _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Home Phone _____

Office Phone _____ Office Phone _____

Cell Phone _____ Cell Phone _____

Other Phone _____ Other Phone _____

Home Fax _____ Home Fax _____

Office Fax _____ Office Fax _____

Home E-mail _____ Home E-mail _____

Office E-mail _____ Office E-mail _____

(Signature of Person to be Contacted) Date _____

(Signature of Person to be Contacted) Date _____

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Reviewed by _____ Date _____



CFC REVISED 4/05 (PAGE 1 OF 1)

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