

AUTHORIZATION TO RELEASE EMPLOYMENT HISTORY (\$20 Additional for each Employment Verification)

<i>DATE</i> :	
	uthorize my employer
to release information regarding my current length of employment to GREAT OAKS RE	<u>.</u> ,
Company Name	Company Phone Number
	Supervisor
Company Address	
Employee Signature	Employee Phone Number
Print Employee Name	
Information to be filled out by Employer:	
Length of time employed:	
Income per pay period: \$	
Length of nav period.	