

## Limited Power of Attorney

I hereby appoint Shield Law Group officers and contractors of address 1011 Volunteer Parkway Bristol, TN 37620 as my true and lawful attorney in fact ("agent"). Authorizing full power to represent me and to do and perform every action necessary or advisable to be done that I may legally do and handle all credit matters adversely affecting my credit reports and add authorized user account(s) to my credit (when agreed upon).

I grant my Agent the specific powers to:

1. Request or receive confidential credit and account information from creditors, credit reporting agencies or any other third party.
2. Receive or execute all items, information, documents (both confidential or otherwise) in connection with arbitration of debt or documents necessary in the event of retaining local counsel.
3. Proactively intervene, intercede, close accounts or negotiate the settlement of any and all creditor claims or disputes as I am concerned.
4. Make good faith settlements on my behalf with or without my signature of approval.

**Additionally, this Limited Power of Attorney shall serve as formal notice under 15 U.S.C. 1692 to cease all further communication with me except for reasons specifically set forth in the Federal Law, and to instead contact my Agent, Shield Law Group.**

Further, as a creditor or third party agent of a creditor; Under the general laws of both the Fair Debt Collections Practices and the Fair Credit Reporting Act, you are required to work with my designated Agent.

I authorize Shield Law Group to release this Power of Attorney to any creditors or credit reporting agencies on my behalf.

_____	_____
Name	Signature
_____	_____
Street Address	Birthdate
_____	_____
City, State, Zip	Date (LPOA Expires 180 days from date executed)
_____	
Social Security Number	

State \_\_\_\_\_, \_\_\_\_\_ County

I, \_\_\_\_\_, a Notary Public for said County and State do hereby certify that

\_\_\_\_\_ personally appeared before me this day and acknowledged the

due execution of the foregoing instrument.

Witness my hand and official seal on this the \_\_\_\_\_ day

of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_, Notary Public

My Commission Expires \_\_\_\_\_ 20\_\_\_\_.