

RELEASE OF INFORMATION

Date: _____

Participant(s) Full Name: _____

I (we), _____, give Amicus Fund, Inc. ("Amicus Fund") permission to give and/or obtain information related to my (our) tenancy from my (our) prospective (or current landlord), including but not limited to the rental application and screening process, lease/rental agreement, rent payments, and tenancy violations, warnings, notices and terminations.

In addition, I (we) give Amicus Fund permission to obtain any and all information about me (us) that is related to services I (we) receive from the following list of organizations:

I (we) understand that this Release of Information is needed in order for Amicus Fund to provide support to help me (us) obtain housing and be successful in retaining housing.

I (we) understand that this Release of Information automatically expires 30 days after the date of my (our) termination from the Amicus Fund program. I (we) give consent voluntarily and understand that I (we) may, at any time, revoke it in writing to the organization listed above that is giving or receiving the information, including Amicus Fund. I (we) have the right to see the information provided under this Release of Information at any time.

My (our) authorization releases Amicus Fund from any and all liability for damages arising from inquiring about, obtaining, providing and/or taking action based on information covered by this Release of Information.

I (we) have read this Release of Information or it has been read to me and I (we) understand its content. I (we) understand that I (we) have a right to receive a copy of this Release of Information.

Signature of Tenant

Date

My (our) signature(s) allow(s) a photocopy or fax copy of this authorization to be as valid as the original.