



CHECK AUTHORIZATION

Date: _____

To: _____

For: _____

To Whom It May Concern:

You are hereby notified that I have authorized the Littman Talent Group, Inc. to accept delivery of any and all checks and/or sums of money which may from time to time be or become payable to me from you. I hereby authorize you to deliver all checks and/or sums of money to the said Littman Talent Group, Inc.

This authorization shall remain in effect until written notice of the revocation thereof executed and acknowledged by me shall be served upon you by registered mail. I hereby indemnify and save you free and harmless of and from any and all losses, costs of expenses which may be incurred or suffered by you by any reason of any action taken by you in reliance upon this authorization.

All previous authorizations are hereby revoked.

Best regards,

Signature: _____

Name: _____

SSN: _____