



BUTLER & COLLEGE, LLC

1055 N. Main Street, Suite D
Summerville, SC 29483
(843) 284-8676
Fax: (877) 279-3433
tammy@bandclawfirm.com

PAYOFF AUTHORIZATION

TO: _____
NAME OF MORTGAGE LENDER

RE: _____
NAME OF BORROWER(S)

ACCOUNT NUMBER

Dear Sir or Madam:

Please accept my signature below as authorization for you to release a payoff quote for the above referenced mortgage account to Butler & College, LLC. Thank you for your immediate attention to this matter.

Sincerely,

 X
SIGNATURE OF BORROWER(S)

 X
SIGNATURE OF BORROWER(S)