



# Client Power of Attorney

4 pages (including cover sheet)

NEEDS IMMEDIATE ATTENTION!

"Engagement Notification"

CreditAllianceGroup™ Representation - "Request to Cease Verbal Communication"

Attn: POA/ Re:

**Creditor Name**

Account #:

REF#:

Contact #: ( \_\_\_ )

Fax #: ( \_\_\_ )



**“Engagement Notification” “Request to Cease Verbal Communication”**

To Whom It May Concern:

This letter will confirm the fact that I have entered into a debt management program, as I am no longer able to service my debts at their current levels. I am sending this letter to humbly request your office to please remove my phone numbers from you database and contact me through written correspondence ONLY. If your office is making calls it is not helping in any way whatsoever to expedite the improvement of my current situation, but rather causing severe undue stress and merely compounding the situation; making it nearly impossible to remedy the debts in a more timely fashion. I fully understand my financial obligations to you and will attempt to make restitution to the best of my ability, as I do not wish to seek relief in Federal Bankruptcy Court.

As a result of my circumstances, I have been forced to engage the services of Credit Alliance Group as a measure of dealing with ALL of my debt and not just one individual account, as I have numerous accounts that need reconciliation. Please be advised, from this point forward, I am politely and humbly asking all forms of verbal communication with me to please CEASE. This shall include, but shall not be limited to, my home, work, friends, family and/or places of recreation.

I have provided Credit Alliance Group with my Limited Power of Attorney and they now have the legal authority to speak on my behalf. Please record this fact for your records.

A COPY OF THE SIGNED “LIMITED POWER ATTORNEY” IS ATTACHED FOR YOUR RECORDS.

Contact Information: **CreditAllianceGroup**  
1717 Main Street  
Suite 5800  
Dallas, Texas 75201  
Phone: (214) 329-0314  
Fax: (214) 760-1554

At This time, I am requesting for you to please close the above-mentioned account and to please notify each credit reporting agency to which you report, this closing is at my request. As funds become available Credit Alliance Group will present your office with a settlement proposal, on my behalf, which will take into consideration the number of outstanding accounts, in conjunction with my current economic situation. Credit Alliance Group has recommended a savings budget that will help accomplish settlement as expeditiously as possible. Furthermore, should my financial situation improve at any point during my management program, Credit Alliance Group offices will contact your office with a proposal for settlement ahead of the recommended schedule.

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1717 Main Street Suite 5800 Dallas, TX 75201 Phone (214) 329-0314 Fax (214) 760-1554



**Member**  
International Association of  
Professional Debt Arbitrators  
Certified Debt Specialists



To Whom It May Concern:

This letter is to inform you that **Credit Alliance Group™** has been appointed as the negotiating and debt settlement agent for the above mentioned client. As a result of circumstances beyond our client's control, which have curtailed their ability to meet their normal payment schedules, our client has been forced to engage CAG™ for the sole purpose of debt management assistance. The client has acknowledged the need for financial assistance and has engaged the services of CAG™ as a measure of dealing with all of their credit and not just one individual account. The number of credit accounts the client holds has become entirely overwhelming, and the resolutions that each different creditor wants simply does not fit within the realm of the client's finances. CAG™ has recommended a strict economic budget and savings plan to our client, in order to settle all of their outstanding unsecured debt. This has been recommended, taking into consideration our client's budget and the desire of all parties involved, to accomplish this in as timely manner as possible. Since our client has multiple creditors enrolled in our program, CAG™, as the agent, with "Limited Power of Attorney", will contact your office as money becomes available with a proposal for debt settlement. **Please be advised, should our client's financial situation improve at any point within our program, CAG™ will notify your office for a settlement proposal, ahead of the recommended schedule.** CAG™ will continue to maintain an open line of communication between our offices to ensure the client's willingness to make restitution to the best of their ability. **We ask out of professional courtesy, please be patient, as you will receive a settlement proposal as soon as money becomes available.** For your records, we have attached a "LIMITED POWER OF ATTORNEY" signed by our client. Please update your records to record the fact of our Power of Attorney in order to expedite communications between our offices.

At the account holder's request, if the above stated account has not already been closed, we professionally ask your office to please close account and notify in writing, the above-mentioned client and all credit reporting agencies to which you report, the account has been closed at the account holder's request.

**Should you have any question or concerns regarding this account, please redirect your calls to our offices at (214) 329-0314, and we will be more than happy to discuss any details of our program or other information that will assist you in your decision making process.**

Thank you very much for your cooperation in this matter, and we look forward to contacting you to resolve this account as soon as possible.

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# CreditAllianceGroup™

## LIMITED POWER OF ATTORNEY

I \_\_\_\_\_ as the Principle(s) have the right and as such appoint CreditAllianceGroup™ (hereinafter know as "ATTORNEY IN FACT") with full power and authority to perform each and every act which may be necessary or convenient to connect with the following tasks, as fully, and for all intents and purposes as I might or could do if personally present, hereby ratifying and confirming all that my said ATTORNEY IN FACT shall lawfully do or cause to be done in my name or behalf.

To proactively intercede and/or intervene and/or negotiate, the settlement of any and all of my enrolled creditor claims, liens, judgment, and/or disputes. **ATTORNEY IN FACT WILL NOT REPRESENT CLIENT IN ANY LEGAL PROCEEDINGS.** In such events, CLIENT must retain legal representation of its own and at its own expense. Be it further known and understood that I/We consider the failure of any creditor, third party agent (collection agent or member of the bar) to recognize the Power of Attorney to intentionally be acting to interfere with my/our prospective contractual advantage, which may be legally actionable in tort.

### NOTICE:

1. In accordance with the section 805(B) of the Fair Debt Collection Act, 15 U.S.C 1692c, I/We hereby authorize all future communications from any all government agencies, creditors, collection, agents, attorneys, credit bureaus, or any other third parties to be directed to the ATTORNEY IN FACT, stated above.
2. In accordance with the 805(C) of The Fair Debt Collection Act, 15 U.S.C 1692c, the recipient of an original, photocopy or facsimile of this document is specifically instructed by me/us in any manner whatever and to direct all future communications to the designated ATTORNEY IN FACT stated above.
3. This limited Power of Attorney is effective upon signing of the principal(s) and specifically authorizes the recipients authorized agent upon receipt to disclose, talk about, communicate about, convey documents to and to otherwise provide to and disclose as information concerning any payable, debt, account, lien, suit, or judgment for which I/We are allegedly responsible, disputed or otherwise.
4. The recipient of this LIMITED POWER OF ATTORNEY FORM, whether by original, photocopy or facsimile, is specifically instructed by the undersigned PRINCIPAL(S) to contact the designated ATTORNEY IN FACT at the addresses set forth below; in addition, under the general laws under the Fair Debt Collection Practice Act, and the Fair Credit Reporting Act, as a creditor or third party agent of a creditor, you do not have the ability to refuse to work with my/our designated ATTORNEY IN FACT, for such would constitute a refusal to work with me/us. If you so choose, you do so at your own risk.
5. **Federal ESIGN (Electronic Signatures in Global and National Commerce Act) Legislation** which was enacted in 2000 and states that "electronic contracts should be treated like any other contract under ordinary contract law" **This legislation gives online signing the same legal effect as pen-and-ink.** The law states that a contract or signature may not be denied legal effect, validity, or enforceability solely because it is in electronic form.

ATTORNEY IN FACT  
 CreditAllianceGroup™  
 1717 Main Street 58<sup>th</sup> Floor Suite 5800  
 Dallas, Texas 75201  
 Phone: 214-329-0314 Fax: 214-742-1500

Client Signature \_\_\_\_\_ Executed \_\_\_\_\_

Primary Account Holder:

Client Signature \_\_\_\_\_ Executed \_\_\_\_\_

Spouse/Partner

1717 Main Street Suite 5800 Dallas, TX 75201 Phone (214) 329-0314 Fax (214) 760-1554



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