BROKERS INTERNATIONAL
FINANCIAL SERVICES, LLC
"BUILDING OPPORTUNITY"
Member FINRA/SIPC

102 SE 13th Street, P.O. Box 634
Panora, IA 50216 877-886-1939

Independent Contractor Authorization

I. I understand that an investigative report may be generated on me that may include information as to my character, work habits, performance and experience, along with reasons for termination of past employment/professional license or credentials; financial/credit history; or criminal/civil/driving record history. I fully give my consent to and understand that **Equifax**, may be requesting information from public and private sources about any of the information noted earlier in this paragraph.

II. If applicable, medical and worker's compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws. According to the Fair Credit Reporting Act (FCRA, Public Law 91-508, Title VI), which was revised effective September 30, 1997, I am entitled to know if the considerations for which I am applying are denied because of information obtained from a consumer-reporting agency. If so, I will be notified and be given the name of the agency providing that report.

III. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this release shall be as valid as the original. This release is valid for most federal, state and county agencies.

IV. Minnesota/California applicants only: If you want a copy of the report ordered, check this box _____. The report will be sent by the consumer-reporting agency to you at the address listed below your signature.

V. I hereby authorize, without reservation, any financial institution, law enforcement agency, information service bureau, school, employer or insurance company contacted by **Equifax,** to furnish the information described in Section I.

VI. Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien)

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.

APPLICANT COMPLETE THE FOLLOWING:

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.

_____ _____ _____
Please print other names you have used Social Security Number Date of Birth

_____ _____
Home address City, State Zip

_____ _____ _____
Driver's license Number State Name as it appears on License

Have you ever been convicted of a crime? _____ No _____ Yes
If yes, please provide city and state of conviction and details of conviction on a separate sheet.

_____ _____
Signature Today's Date

_____
Please print full name