



FINANCIAL SERVICES

Common Sense Loans at Uncommon Speed®

REFERENCE LIST

APPLICANT NAME(S) _____

MINIMUM OF SIX (6) NAMES/TELEPHONE NUMBERS
 REQUIRED FOR FUNDING
 DO NOT INCLUDE DECEASED INDIVIDUALS OR MINOR
 CHILDREN

(PLEASE PRINT)

<u>RELATIONSHIP</u>	<u>NAME</u>	<u>TELEPHONE</u>	<u>NO POST OFFICE BOX STREET ADDRESS ONLY</u>	<u>CITY, STATE, ZIP</u>	<u>EMAIL</u>
Spouse					
Father					
Mother					
Grandfather					
Grandmother					
Brother					
Sister					
Aunt					
Uncle					
Child (Over 18)					
Friend					
Friend					
Landlord					

Do you have a home telephone? Yes No

Can you be called at work? Yes No

I Authorize PFS to contact any of the persons listed above
 for location purposes.

If yes, please complete and sign attached
 workplace authorization form.

Home Telephone Number _____

Work Telephone Number _____

Signature _____ Date _____

Department or Extension Name/Number _____

Name of Supervisor _____

Cell Telephone Number _____

Normal Work Hours: 1st 2nd 3rd Swing Irregular

Signature _____ Date _____