

# AUTHORIZATION AND WAIVER OF CONFIDENTIALITY

To:

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This is to notify you that I, \_\_\_\_\_, the undersigned do hereby authorize the person listed below, \_\_\_\_\_ to act as my **legal representative** and **legal counsel** in the matter now pending in my case. You are hereby authorized to release any and all information, including all that is deemed confidential as may be requested, regarding the following matter:

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Please send copies of all correspondence to me and my authorized representative.

My authorized legal representative is:

\_\_\_\_\_  
, Esquire

FL BAR ID \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Client SSN: \_\_\_\_\_

Client Address: \_\_\_\_\_

\_\_\_\_\_

Client Telephone: \_\_\_\_\_