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CLIENT AUTHORIZATION TO RELEASE INFORMATION TO THIRD PARTIES

I, Attornev	at Law, LLC, do hereby authorize the	, the client being represented by release of all information and d	Donnie Gamache, locuments that my
	sees fit to furnish in this case to the belo		
Pa	aying my legal fees;		
M	<pre>(y parent(s);</pre>		
M	y spouse, close family member(s), frien	d(s), or loved one(s);	
Ot	ther		
	ould be beneficial for me for the sa on or documents as my attorney sees fit		ies) to have such
the same renders it I do not h	understand that I may revoke this author to Donnie Gamache, Attorney at Law in the discretion of my attorney whether the erby create any duty to release in my att in any third party(ies) to have same.	w, LLC. I also understand that r or not to release any information	this authorization or documents and
In	dividual(s) or entity(ies) so authorized (client please print names below):	
Aı	nd I do hereby give my authorization an	d consent,	
Si	gnature of Client	Date	