

13696 US Hwy 441 – Suite 200 The Villages, FL 32159 352-205-4995

## **AUTHORIZATION FOR RELEASE OF LEGAL INFORMATION**

By my signature below, I,,
hereby authorize the Law Firm of
to provide to the Millhorn & Shanawany Law Firm, PLLC, at the above address, a complete and legible copy of
my entire file. This information should include, but not be limited to, correspondence between your firm and
me, correspondence between third parties and your firm or me, and notes (including attorney's notes).
Please mail the above requested documents to the address included in the letterhead of this letter. This
authorization is intended to be continuing in nature and will remain in full force and effect until revoked by me
in writing. Your full cooperation with the Millhorn & Shanawany Law Firm, PLLC is requested.
A facsimile or photographic copy of this Authority for Release of Legal Information shall be considered
the same as an original.
Dated this day of, 20
(Signature of Client)