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AUTHORIZATION FOR FINANCIAL INFORMATION

TO _____:

This authorizes all banks, savings and loan associations, credit unions, brokers, and other holders of relevant information to furnish full and complete financial reports and information, including all MaineCare related applications, information, and documentation regarding property owned by _____ to the law office of Carlin & Shapiro, P.A., Barbara Carlin, Esq.; and Paul Shapiro, Esq., 178 Middle Street, Suite 401, Portland, Maine, 04101.

A photocopy of this authorization shall have the same effect as the original.

This release is valid until the recipient of this release is notified in writing that this release is no longer valid.

Dated: _____

Signed