***AUTHORIZATION***

***TO GAIN L&I CLAIM FILE ACCESS***

***(BUT NOT A NOTICE OF REPRESENTATION):***

L&I CLAIM NUMBER(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Claimant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To the Department of Labor & Industries, State of Washington, any Self-Insured Employer, and/or any other interested party:

 KNOW YE by these presents that the above indicated L&I Claimant has Authorized Attorneys Spencer D. Parr and Ashton K. Dennis of Washington Law Center to obtain access to their L&I Claim file information, without limitation. This is *not* a request to change the claimant’s address as shown in the Department’s records. Washington Law Center and its attorneys are not appointed as the above-indicated claimant’s attorneys in the above-indicated L&I claim files, although complete access to the contents thereof has been granted, as indicated by the Claimant’s signature below.

The below-indicated survivor of the injured worker also hereby grants the above-named Attorneys of Washington Law Center a Power of Attorney to execute any such legal documents or initiate/continue any such legal process as may be necessary, in the sole opinion of said Attorneys, to effectuate their representation as appointed above, and until such time as this Power of Attorney may be revoked in writing to the Washington State Department of Labor & Industries or by other operation of law.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Injured Worker’s Signature Date