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### AUTHORIZATION TO DISCUSS CASE

Client name: \_\_\_\_\_

I hereby give the law firm Saedi & Wells, LLC permission to discuss my case, CASE NUMBER \_\_\_\_\_ with the following individuals:

1. \_\_\_\_\_ Relationship: \_\_\_\_\_
2. \_\_\_\_\_ Relationship: \_\_\_\_\_
3. \_\_\_\_\_ Relationship: \_\_\_\_\_

I understand that Saedi & Wells, LLC **DOES NOT** discuss any client case information with real estate agents, investors or brokers and that I must deal with the law firm directly on any real estate transfer or refinance issues. Agents, brokers and investor's calls WILL NOT BE RETURNED.

Client signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IN ORDER TO ENSURE CLIENT'S INFORMATION IS  
PROTECTED WE REQUIRE ALL CLIENTS TO SUBMIT A  
COPY OF THEIR PHOTO ID WITH THIS FORM**

PLEASE FAX THIS FORM BACK TO: 404.885.6651 OR EMAIL THIS FORM AND A COPY OF YOUR PHOTO ID TO: [sperrimon@saediwellsllaw.com](mailto:sperrimon@saediwellsllaw.com)