

ESTATE PLANNING: CONFIDENTIALITY WAIVER

The McDonald Law Firm will release information about your legal matter only to authorized individuals. This form lists to whom, if anyone, we may release information. Please complete, sign and mail to McDonald Law Firm, 222 S. U.S. Highway One, Suite 203, Tequesta, Florida 33469, or fax to 561-748-2280. (Note – if married and both spouses are clients, each client completes his or her own section.)

PLEASE PRINT CLEARLY

CLIENT #1:

Name _____

YES, I authorize the McDonald Law Firm to release information about my estate plan to the people listed below. If at any time one or more of these people is no longer authorized to receive information, I understand that it is my obligation to notify the McDonald Law Firm in writing.

Spouse (if applicable): Release information to spouse? YES NO

If YES, provide spouse's name _____

Others: Release information to others? YES NO

If YES, provide names and relationship (e.g., child, niece, sibling, etc.). Use additional sheet if necessary.

1. Name _____ Relationship _____

2. Name _____ Relationship _____

NO, The McDonald Law Firm may not release information to anyone about my estate plan.

Signature: _____ **Date:** _____

**IF MARRIED: SPOUSE COMPLETES THIS SECTION
IF SPOUSE IS ALSO A MCDONALD LAW FIRM CLIENT.**

CLIENT #2:

Name _____

YES, I authorize the McDonald Law Firm to release information about my estate plan to the people listed below. If at any time one or more of these people is no longer authorized to receive information, I understand that it is my obligation to notify the McDonald Law Firm in writing.

Spouse (if applicable): Release information to spouse? YES NO

If YES, provide spouse's name _____

Others: Release information to others? YES NO

If YES, provide names and relationship (e.g., child, niece, sibling, etc.). Use additional sheet if necessary.

1. Name _____ Relationship _____

2. Name _____ Relationship _____

NO, The McDonald Law Firm may not release information to anyone about my estate plan.

Signature: _____ **Date:** _____

ADDITIONAL AUTHORIZED INDIVIDUALS:

Use this side to list all additional people the McDonald Law Firm is authorized to speak with regarding your legal matter.

Client #1:

Name: _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Client #2:

Name: _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

Complete, sign, date and return this form to:

McDonald Law Firm

222 S. U.S. Highway One, Suite 203

Tequesta, Florida 33469

Facsimile: 561-748-2280