

Third Party Authorization Form

I (we), hereby give permission for JJSA Advisors, Ltd. to provide information requested to the third party listed below. This form may be revoked via telephone or in writing at any time. Otherwise, this authorization will remain active until further notice.			
Third Party Name:	_ Title:		Phone Number:
Third Party Name:	_ Title:		Phone Number:
Third Party Name:	_ Title:		Phone Number:
Client Signature:		Date:	
Client Signature:		Date:	