

Designation of Representative

Claim No.	
Party Name	
Current Representative	
New Representative	
Firm Name	
Email Address	
Physical Address	
Phone	
Fax	
Status	<input type="checkbox"/> The current representative is withdrawing. The new representative will serve as sole counsel. <input type="checkbox"/> The new representative will serve as co-counsel with the current representative. <input type="checkbox"/> Other _____

Please email the completed form to:

Johnnie M. Mickens | Case Specialist

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and

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