

AUTHORIZATION FORM
FOR MEMBERS OF THE LYCOMING LAW ASSOCIATION

I, _____, the undersigned attorney and a member of the Lycoming Law Association, do hereby authorize the appropriate officer of Lycoming County to forward to the Lycoming Law Association Foundation one, two, or all the arbitration fees which I would normally receive for service as a member of a Board of Arbitration hearing a case in Lycoming County. This authorization shall cover arbitration hearings per calendar year beginning in 2006 and continue from year to year thereafter until revoked by me in writing to the Prothonotary of Lycoming County.

Further, I designate that these funds are to be utilized by the Lycoming Law Association Foundation, in its discretion, for support of qualifying non-profit organizations providing legal services to the indigent, including but not limited to North Penn Legal Services. These funds shall be considered as part of my support for the delivery of legal services to the indigent.

It is understood that this form is to be submitted to the Prothonotary of Lycoming County. This authorization is made effective this _____ day of _____, 20____.

Name: _____
(Signature) (Please print name)

Business Address: _____

Telephone Number: _____ Fax: _____ E-Mail: _____