

**LIMITED WAIVER OF CONFIDENTIALITY &
AUTHORIZATION TO DISCLOSE INFORMATION**

I, _____, hereby authorize the release of the material designated below which is deemed confidential and relating to the Committee on Conduct's investigation in _____ [case number].

- Attorney's self-report to District of Colorado [D.C.COLO.LAttyR 4(a)]
 - Request for relief from the Rule of Good Standing [D.C.COLO.LAttyR 3(d)]
 - Complaint of attorney misconduct [D.C.COLO.LAttyR 7(a)]
 - Attorney's response
 - Application for reinstatement/readmission [D.C.COLO.LAttyR 11(a)]
 - Reinstatement by original disciplining court
 - Order of Disciplinary Panel
 - Investigative record in full
 - Other: _____
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Please email this material to the following recipient(s):

Name/Entity: _____

Email address: _____

Name/Entity: _____

Email address: _____

Name/Entity: _____

Email address: _____

This waiver shall be considered revoked and terminate effective _____ [date].

Attorney's signature

Date