

Date: _____

Employer Name and Address and Phone Number

Phone: _____

Fax: _____

To Whom It May Concern:

Please be advised that the undersigned is REQUESTING and AUTHORIZING any and all **COPIES OF PAYSTUBS** reflecting the gross amount of pay, net amount of pay, year to date amounts, tax deductions, and any other deductions be released to Isla Law Offices and Roger A. Isla, Esq. Also, please include any other bonus or vacation pays received by your employee named below.

You are further authorized to provide any requested information immediately and directly to Isla Law Offices and Roger A. Isla, Esq., or his employees or agents, via fax, email, regular mail or any other convenient medium at the following address:

Isla Law Offices
Attn: Roger A. Isla, Esq.
3618 West Street.
Weirton WV, 26062

Phone: 304-914-3573
Fax: 304-224-1541
Email: raisla@islawoffices.com

The purpose of this authorization is for my personal legal use and convenience. Further, I desire to allow Isla Law Offices and Roger A. Isla, Esq. to receive this information directly and expeditiously without the necessity of my direct involvement.

At this time, I am requesting all pay stubs from the following dates:

_____.

Accordingly, please forward any and all information requested.

Very truly yours,

Signature: _____

Print Name: _____

SSN: _____