



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 at any time. Otherwise, this authorization will remain active until further notice.

Third Party Name: _____ Phone Number: _____

Email: _____

Third Party Name: _____ Phone Number: _____

Email: _____

Client Signature: _____ Date: _____

Client Signature: _____ Date: _____

Securities offered through United Planners Financial Services, Member FINRA/SIPC. Advisory Services offered through JJSA Advisors, LLC. JJSA Advisors and United Planners are not affiliated.