



TRANSFER OF AUTHORIZATION FOR EDI ENROLLMENT

I _____ declare that I am an officer of _____
(Your Name, as Representative of the Company) (Company Name)
and that I have the authority to sign this authorization on the company's behalf.

I _____ hereby authorize Kareo Inc. and its enrollment representatives to
(Your Name, as Representative of the Company)
act on our behalf in **all activities relating to electronic data interchange/EDI enrollment** (including signing of all documents relating to these matters).

- All acts of enrollment carried out by Kareo Inc. and its enrollment representatives on our behalf have the same effect as acts of our own.
- I shall provide Kareo with all necessary information (for example, NPI numbers, tax id numbers, etc.) for the limited purpose of Kareo completing the forms.
- I acknowledge that Kareo will rely on the accuracy of the provided information.

Printed name

Title

Legal Company Name

Date



SIGNATURE EXAMPLES

**Please sign in the center of the box.*

Please provide your quick signature.

Please provide your formal signature.

Please provide your initials.