



## Document Vault Authorization Form

**Genser Cona Elder Law is pleased to offer you and your authorized loved ones on-line access to your estate planning documents.**

By signing below, you authorize Genser Cona Elder Law to upload your estate planning documents to the Genser Cona Elder Law Document Vault powered by Citrix ShareFile. You and your authorized delegate(s) will have access to your estate planning documents via our Client Portal located on the Genser Cona Elder Law website: [www.genserlaw.com](http://www.genserlaw.com).

I authorize the following documents to be uploaded to the Genser Cona Elder Law Document Vault:

- |  |  |
|--|--|
| <input type="checkbox"/> Health Care Proxy | <input type="checkbox"/> Last Will & Testament |
| <input type="checkbox"/> Power of Attorney | <input type="checkbox"/> Trust                 |
| <input type="checkbox"/> Living Will       | <input type="checkbox"/> Other: _____          |

I authorize the following people to access my Genser Cona Elder Law Client Document Vault containing my estate planning documents under their own email and password.

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date: \_\_\_\_\_

Citrix ShareFile is HIPAA compliant and meets the HIPAA requirements for privacy and security. The software has three levels of back up, is hosted on a private domain and has a two-step verification system for added protection. Documents may be viewed, downloaded and printed ONLY. Genser Cona Elder Law is not responsible for any document tampering and uploading of these documents by anyone other than Genser Cona Elder Law. These documents may only be downloaded by the client and their authorized agents for the specific and intended uses of said documents.

Administrative Use ONLY

Matter Name: \_\_\_\_\_ Attorney Authorization: \_\_\_\_\_

Authorized By: \_\_\_\_\_ Date Effective: \_\_\_\_\_