Positive Energy Solutions Corporation

2993 Piedmont Road NE
Atlanta, Georgia 30305

Authorization For Release of Protected Health Information

I, _____, hereby authorize _____
    Your Name   Provider

□to disclose to □to obtain from □to exchange with

_____

Name of agency, attorney, school counselor, therapist, etc.

_____

Address, city, state and zip code

_____

Phone   Fax

for the following purpose:

_____

This authorization may be withdrawn at any time in writing except to the extent that Rebecca Holdgrave, LMFT, or Angela Montfort, LPC; has acted in reliance on it. Upon revocation of authorization, further release of information shall cease immediately. This release of information expires one (1) year following completion or termination of treatment, except for information to be released or exchanged for the purposes of a claim for benefits. If for a claim for benefits, this release of information expires upon termination of coverage under the insurance policy or benefit plan or the final determination of the claim, if later.

I understand that information used or disclosed pursuant to the authorization may be subject to redisclosure by the recipient of your information and no longer protected by the HIPAA Privacy Rule.

_____   _____

Client Signature or legal custodian if client is minor   Date

_____   _____

Witness   Date

To The Recipient of Confidential Information:

If the information disclosed to you relates to substance abuse treatment, these records' confidentiality is protected by Federal Law. Federal regulations (42 CFR Part 2) prohibit you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations. A general authorization for the release of medical or information is not sufficient to release substance abuse records. The Federal Rules restrict any use of the information to criminally investigate or prosecute any substance abuse patient. State laws may also protect the confidentiality of patient's records.