

**Date:** [Date]

**TO:**

[Name of Opposing Party or Insurance Company]

[Address]

[City, State, Zip Code]

**RE:**

**Claim/Case Number:** [Number]

**Client Name:** [Your Name]

**Date of Incident:** [Date of Incident]

To Whom It May Concern,

Please be advised that I have revoked the authority of my former legal counsel, [Name of Former Attorney/Law Firm], to represent me in the above-referenced matter, effective immediately.

I have formally retained the following attorney to represent my interests moving forward:

**Attorney Name:** [New Attorney Name]

**Law Firm:** [New Law Firm Name]

**Address:** [Address]

**Phone Number:** [Phone Number]

**Email:** [Email Address]

Please direct all future communications, correspondence, and legal documents regarding this matter exclusively to my new attorney. You are hereby instructed to cease all direct contact with me and my former counsel regarding this claim.

Thank you for your prompt attention to this change of representation.

Sincerely,

[Your Signature]

[Your Printed Name]

cc: [Name of Former Attorney/Law Firm]