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6	IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON IN AND FOR THE COUNTY OF KING			
7				
8	NO Plaintiff,			
9 10	v. STIPULATION AND AUTHORIZATION RE TISSUE SLIDES, TISSUE BLOCKS AND			
11	, PATHOLOGY MATERIALS OF			
12	Defendants.			
13	The newties havely stimulate and across as follows:			
14				
15	1. Defendants may obtain all tissue slides, tissue blocks, and/or pathology materials			
16	taken from:			
17	Plaintiff:			
18	Date of birth:			
19	Social Security No.:			
20	from the following health care facilities or providers:			
21	A.			
22				
23	3			
24	distributed as follows:			
25				
26				
	STIPULATION AND AUTHORIZATION RE TISSUE SLIDES, TISSUE BLOCKS AND			

PATHOLOGY MATERIALS - 1

1	3. Defendants' obligation, if any, to obtain written reports and the provision of copie		
2	of any written reports generated as a consequer	nce of this analysis shall be governed by the	
3	applicable Rules of Civil Procedure, style orders of	covering asbestos litigation, and case law.	
4	4. A photocopy of the original of this stip	oulation shall be as valid as the original.	
5			
6	DATED this day of	, 2011.	
7 8	SCHROETER, GOLDMARK & BENDER		
9			
10	By JANET L. RICE, WSBA #9386		
11	KRISTIN HOUSER, WSBA #7286 Counsel for Plaintiffs		
12	500 Central Building 810 Third Avenue		
13	Seattle, WA 98104 (206) 622-8000		
14			
15	DATED this day of	, 2011.	
16	(FIRM NAME)		
17			
18			
19	Counsel for Defendant		
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23 24			
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STIPULATION AND AUTHORIZATION RE TISSUE SLIDES, TISSUE BLOCKS AND PATHOLOGY MATERIALS - 3

AUTHORIZATION

2	AUTHORIZATION FOR TRANSMITTAL OF PATHOLOGY MATERIAL You are hereby authorized and directed to permit the transmittal of pathology materials.				
3	pertaining to, that you have at your facility to the following pursuant to the foregoing stipulation.				
4	pursuant to the foregoing supuration.				
5	2. <u>REQUEST FOR CONFIDENTIALITY AND REVOCATION OF PREVIOUS AUTHORIZATIONS</u> . By reason of the fact that such information that you have acquired as				
6					
7	requested to treat such information as confidential and requested not to furnish any of such information in any form to anyone, without written authorization from me. I hereby revoke any				
8	previously-dated medical waiver or authorization.				
9	3. <u>EFFECT OF A COPY</u> . A photostatic copy of this authorization shall be considered as effective and valid as the original.				
10	Your full cooperation with the authorized attorney is requested.				
11					
12	DATE				
13	(Print Name)				
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STIPULATION AND AUTHORIZATION RE TISSUE SLIDES, TISSUE BLOCKS AND PATHOLOGY MATERIALS - 4