



Authority for representative

Use this form to appoint a representative in a review of a Centrelink decision

Your name: _____

Your date of birth: _____ Review number: _____
DAY/MONTH/YEAR

REPRESENTATIVE DETAILS

Title: _____
(Mr/Mrs/Ms/Miss/Other)

Name: _____
(First name) (Last name)

Organisation: _____
(If applicable)

Postal address: _____

Telephone: (_____) (_____) _____
Country code Area code

Mobile: _____

Email: _____

Relationship of the person to you (tick one box only):

legal representative my spouse/partner relative (please specify) _____

other (please specify) _____

Will your representative be attending the hearing with you? Yes No

I appoint the person whose details are above to act as my representative.

Signature: _____ Date: _____
DAY/MONTH/YEAR