



## Porting Letter of Authorization

Your name

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Your practice/business name

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The fax number you wish to port

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Your Updox Account Number ( *Please log in to Updox and hover in the lower right corner of the Inbox to find your account number.*)

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By signing this LOA, you indicate that

- the porting process has been explained to you
- you understand the porting process
- you authorize Updox and its partners to initiate the process of porting your fax number

Authorized signature

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Date

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