



**CONSENT TO THE DESTRUCTION OF CLOSED FILE**

I, \_\_\_\_\_ (PRINT NAME), do hereby acknowledge that I have been informed that upon completion of my legal work, my attorneys, Turrentine Law Firm, PLLC will prepare my file to be stored electronically—the physical file being destroyed with all its contents. However, prior to such destruction, I will be given the option of either retrieving my physical file (for which I will not be charged for copies but may be charged for postage costs), OR; obtaining an electronic copy of my file.

Therefore, in anticipation of my file’s closing, I hereby agree and consent that my closed file and all its contents may be destroyed and electronically stored by Turrentine Law Firm, PLLC. I further understand and agree that if I do not choose to retrieve my file prior to its destruction, any later-requested hardcopy may incur cost to me. Further, I understand that because the data is being electronically stored, I am hereby agreeing to waive, hold harmless and indemnify Turrentine Law Firm, PLLC and all its employees and agents for any computer malfunctions which may cause my electronic data to be lost. Furthermore, I agree and consent to the destruction of my file by shredding all documents contained therein.

PLEASE CHOOSE ONE OPTION:

\_\_\_\_\_ I would like to retrieve my file, please send it to the following address:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I do not wish to retrieve my file, you may destroy it with my consent.

\_\_\_\_\_ I would like to retrieve my file via email, please send it to me at the following email address:

\_\_\_\_\_

\_\_\_\_\_ Further, I give this Firm permission to speak to \_\_\_\_\_ about my case. (This blank is to be filled in only if there is someone you wish us to discuss your case.)

This the \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_. \_\_\_\_\_  
Client’s Signature

Please mail this completed form to our mailing address below. Thank you.

**TURRENTINE LAW FIRM, PLLC**  
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