Form 53h

To be inserted by Court		
Case Number:		
Date Filed:		
FDN:		

AUTHORISATION

SUPREME / DISTRICT / MAGISTRATES / YOUTH circle one COURT OF SOUTH AUSTRALIA COURT OF APPEAL circle if applicable SPECIAL STATUTORY JURISDICTIONName of list LIST If applicable

Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.

Applicant

Party Title	Full Name (including Also Known	as, capacity (eg Administrator, L	iquidator, Trustee) and Litigation Guard	dian Name (if applicable))
Address for service				
	Ofer of Address (in shading and for			
	Street Address (including unit or I	evel number and name of proper	ty if required)	
	City/town/suburb	State	Postcode	Country
	Email address			
Phone Details				
	Type - Number			

Only complete if applicable otherwise mark	as N/A			
Party Title	Full Name (including Also Known	i as, capacity (eg Administrator, l	Liquidator, Trustee) and Litigation Guar	dian Name (if applicable))
Address for service				
	Street Address (including unit or level number and name of property if required)			
	City/town/suburb	State	Postcode	Country
	Email address			Journay
Phone Details				
	Type - Number			

Only complete if applicable otherwise mark as N/A

Party Title	Full Name (including Also Known	as, capacity (eg Administrator, L	iquidator, Trustee) and Litigation Guard	dian Name (if applicable))
Address for service				
	Street Address (including unit or I	evel number and name of proper	ty if required)	
	City/town/suburb	State	Postcode	Country
	Email address			
Phone Details				
	Type - Number			

Only complete if applicable otherwise mark as N/A

Party Title	Full Name (including Also Known	as, capacity (eg Administrator, L	iquidator, Trustee) and Litigation Guard	dian Name (if applicable))
Address for service				
	Street Address (including unit or I	evel number and name of proper	ty if required)	
	City/town/suburb	State	Postcode	Country
	Email address			
Dhana Dataila	Email address			
Phone Details				
	Type - Number			

Authorisation
<i>I / We</i> authorise the above named to file and serve documents on <i>my / our</i> behalf.
Signature(s)
Name(s) printed
ار applicable Office held by signatory within body corporate (director/secretary)
Date

Service

The party filing this document is required to serve it on all other parties in accordance with the Rules of Court.

Parties are required to provide an email address for communications with the Court and with other parties. Documents in the case can and will be served by email except when the Rules of Court require personal service.

Note to Authorising Party

If you no longer wish the authorised person to file and serve documents on your behalf, you will need to file a Deauthorisation.