



TZ Medical
Sparked by your ideas

To Whom It May Concern:

Subject: Authorization for FCC and IC submissions

As FCC and IC registered contact for FCC/IC equipment authorization filing submissions for

TZ Medical, Inc.
17750 SW Upper Boones Ferry Rd. #150
Portland, OR 97224

and pursuant to FCC KDB852134D01 Authorized Policy Form 731 v02r03

I hereby designate the following individual / group as agent authorized to submit and to sign related technical and administrative exhibits such as cover letters, applications, attestations, confidentiality requests.

John Moore
Chris Hammond
TZ Medical, Inc.
17750 SW Upper Boones Ferry Rd. #150
Portland, OR 97224

Ruther Navarro
CETECOM, Inc.
411 Dixon Landing Rd
Milpitas, CA 95035

A copy of this authorization will be submitted with each application for equipment authorization.

Name of registered contact: **John Moore**

Signature:

Date: May 9, 2017

