



TZ Medical
Sparked by your ideas

Date: **February 14, 2012**
Federal Communications Commission
Authorization and Evaluation Division
7435 Oakland Mills Road
Columbia, MD 21046

Attn: OET Dept.

Ref: FCC ID: **ZIMTZMR**
Applicant: **TZ Medical, Inc.**

Dear Examiner,

We the undersigned, hereby authorize **Heiko Strehlow, Director of Regulatory and Antenna Services** (Cetecom, Inc., 411 Dixon Landing Road, Milpitas, CA 95035, Tel.408 586 6214) to act on our behalf in all manners relating to application for equipment authorization, including signing of all documents relating to these matters.

Any and all acts carried out by CETECOM Inc., on our behalf shall have the same effect as acts of our own.

The authorization from **TZ Medical, Inc.**, is valid for **90** days from the date of this letter.

Sincerely,

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