



*Dedicated to the Empowerment
of Individuals with Disabilities*

STATE OFFICE
1304 Vine Street
Jackson, MS 39202
601-969-4009 or 1-800-748-9398

STATEMENT OF CONSUMER CHOICE

I, _____, acknowledge that Living Independence for Everyone (LIFE) has provided me with information regarding my choice of vendors for the durable medical equipment, supplies, repairs or vehicle modifications I am receiving through this office. A list of available vendors has been presented to me and my choice of vendor is

_____.

I understand that should this vendor be unavailable or refuse to provide a comparable dealer discount, that I will have the option of another choice, unless the vendor is a sole provider of the needed service.

Consumer Signature (or Legal Guardian)

Date