

# Authorization Letter

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[Your Full Name]

[Your Address, City, State, Zip Code]

[Email Address and Phone Number]

[Date]

[Recipient's Full Name]

[Recipient's Position or Title]

[Company/Organization Name and Address]

Subject: Authorization Letter

Dear [Recipient's Full Name],

I, [Your Full Name], hereby grant [Authorized Person's Full Name], the authority to act on my behalf in dealing with matters related to [specific task or decision, e.g., handling my financial transactions]. This authorization includes [list specific actions permitted, e.g., withdrawing funds, signing documents], but is not limited to these actions.

This authorization is effective from [Start Date] until [End Date]. [Authorized Person's Full Name] will present proper identification, such as [e.g., a driver's license], for all required transactions. Please contact me directly at [Your Email Address] or [Your Phone Number] for any verification or additional information. Thank you for your assistance and understanding.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Full Name]