

# Personal Authorization Letter

**[Your Name]**

**[Your Address]**

**[City, State, Zip]**

**[Email Address]**

**[Phone Number]**

**[Date]**

**[Recipient's Name or Organization's Name]**

**[Recipient's Address or Organization's Address]**

**[City, State, Zip]**

Subject: Authorization for [Specify Purpose]

Dear [Recipient's Name or Organization's Name],

I, [Your Full Name], hereby authorize [Name of the Authorized Person], holding identification number [ID Number], to act on my behalf in regards to [clearly specify the purpose of authorization, such as managing financial transactions, collecting documents, making decisions, etc.] from [Start Date] to [End Date].

During this period, [Authorized Person's Name] will have the authority to [list out specific powers and limitations, if any]. This includes, but is not limited to, the ability to [provide examples of actions they are permitted to take, such as signing documents, accessing information, making decisions, etc.].

Please note that this authorization is granted only for the purposes mentioned above and should not be extended beyond the specified tasks. Any actions taken by [Authorized Person's Name] on my behalf should be considered as legally valid and binding.

I appreciate your cooperation in this matter and request you to provide [Authorized Person's Name] with any assistance necessary to fulfill these duties.

Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you require any further clarification or verification regarding this authorization.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]