

[Your Company Letterhead]

[Date]

[Recipient Name]

[Recipient Title]

[Recipient Company]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

Subject: Authorized Signatory Confirmation

We hereby confirm that the following individual is authorized to act as a signatory on behalf of [Your Company Name]:

Name: [Authorized Signatory Name]

Title: [Authorized Signatory Title]

Signature: [Authorized Signatory Signature]

Date of Authorization: [Date]

This authorization is valid until further notice or until revoked in writing by [Your Company Name].

Should you have any questions or need further information, please feel free to contact us.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Contact Information]

[Your Email Address]

[Optional: Company Seal or Stamp]