

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Recipient Name]  
[Recipient's Title]  
[Organization/Company Name]  
[Address]  
[City, State, Zip Code]

Subject: Letter of Authorization for DNA Sample

Dear [Recipient Name],

I, [Your Full Name], born on [Your Date of Birth], hereby authorize [Name of the individual or organization receiving the DNA sample], to collect and analyze my DNA sample for the purpose of [specific purpose, e.g., paternity testing, ancestry research, etc.].

I understand that the DNA sample will be used solely for the purpose stated and handled with the utmost confidentiality.

This authorization is valid until [end date or condition for expiration].

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

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]