

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

FNB Bank

[Bank Address]
[City, State, Zip Code]

Subject: Authorization Letter

To Whom It May Concern,

I, [Your Name], hereby authorize [Authorized Person's Name] to act on my behalf regarding my bank account, account number [Your Account Number], at FNB Bank.

This authorization includes, but is not limited to, the ability to perform the following actions:

- Access my account information
- Make deposits and withdrawals
- Manage transactions

This authorization is valid until [End Date] or until such time as I provide written notice of cancellation.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]