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[Your Company Letterhead]
[Date]
[Recipient's Name]
[Recipient's Title]
[Company/Organization Name]
[Address]
[City, State, Zip Code]
Subject: MMD Signature Authority Letter
Dear [Recipient's Name],
This letter serves to confirm that [Name of the Authorized Person],
holding the position of [Position/Title] at [Your Company Name], has been
granted the authority to sign all necessary documents related to
[specific matters, e.g., contracts, agreements, etc.] on behalf of [Your
Company Name].
The authorized signature for [Name of the Authorized Person] is as
follows:
[Signature of the Authorized Person]
This authority is effective immediately and will remain in place until
further notice or revocation communicated in writing.
If you have any questions regarding this authorization, please feel free
to contact me directly at [Your Phone Number] or [Your Email Address].
Sincerely,
[Your Name]
[Your Title]
[Your Company Name]
[Your Phone Number]
[Your Email Address]
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[Company Seal, if applicable]