

[Your Company Letterhead]

[Date]

[Recipient's Name]

[Recipient's Title]

[Recipient's Company]

[Recipient's Address]

[City, State, Zip Code]

Subject: Signature Authority Letter for [Specific Purpose]

Dear [Recipient's Name],

This letter serves to confirm the appointment of [Name of Authorized Person], holding the position of [Title of Authorized Person] at [Your Company Name], as the signatory authorized to execute documents and conduct transactions on behalf of [Your Company Name] in relation to [specific purpose, e.g., business agreements, financial transactions, etc.].

****Details of Authorization:****

1. ****Authorized Signatory:****

- Name: [Name of Authorized Person]
- Title: [Title of Authorized Person]
- Contact Information: [Phone Number, Email Address]

2. ****Scope of Authority:****

- [Clearly define the scope of authority, e.g., the ability to sign contracts, approve expenditures, etc.]

3. ****Effective Date:****

- This authorization is effective as of [Start Date] and will remain in effect until [End Date] or until revoked in writing.

4. ****Revocation of Previous Authorizations:****

- Any previous signature authorities extended to other individuals for the aforementioned purpose are hereby revoked.

Should you require any further verification or have questions regarding this authorization, please do not hesitate to contact me directly at

[Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Signature]

[Printed Name]

[Title]