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[Your Company Letterhead]
[Date]
[Recipient's Name]
[Recipient's Position]
[Recipient's Company/Organization]
[Address]
[City, State, Zip Code]
Subject: Authority Letter for MMD
Dear [Recipient's Name],
I, [Your Name], [Your Position] of [Your Company Name], hereby authorize
[Authorized Person's Name], [Authorized Person's Position], to act on
behalf of our company regarding all matters related to the MMD
(Ministerial Management Directive).
This authority includes, but is not limited to:
- Submitting necessary documents
- Attending meetings
- Making decisions relevant to MMD
This authorization is effective from [Start Date] until [End Date] or
until further notice.
Thank you for your attention to this matter.
Sincerely,
[Your Signature]
[Your Printed Name]
[Your Position]
[Your Company Name]
[Your Contact Information]
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[Company Seal if applicable]