

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Authority's Name]
[Department/Office Name]
[Address]
[City, State, Zip Code]

Subject: Authorization Letter for PSA Transactions

Dear [Authority's Name],

I, [Your Full Name], of legal age, residing at [Your Address], hereby authorize [Authorized Person's Full Name], who is also of legal age and resides at [Authorized Person's Address], to act on my behalf in all matters related to my transactions with the Philippine Statistics Authority (PSA).

This authorization includes, but is not limited to, obtaining certificates, records, and any necessary documents required for [specific purpose, e.g., birth certificate, marriage certificate, etc.].

My identification document is [Type of ID, ID Number], and a photocopy of the said identification is attached for your reference.

This authorization is valid until [end date] or until I revoke it in writing.

Thank you for your attention to this matter.

Sincerely,

[Your Signature]
[Your Printed Name]