

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

[PSA/Recipient's Name]
[PSA Office Address]
[City, State, ZIP Code]

Subject: Authorization Letter

Dear [Recipient's Name/PSA Office],

I, [Your Full Name], authorize [Authorized Person's Full Name] to act on my behalf in obtaining my [specific document, e.g., birth certificate] from the Philippine Statistics Authority (PSA).

Details of the authorized person:

- Name: [Authorized Person's Full Name]
- Address: [Authorized Person's Address]
- Contact Number: [Authorized Person's Phone Number]

This authorization is valid until [expiration date].

Thank you for your assistance.

Sincerely,

[Your Signature (if submitting by mail)]

[Your Printed Name]