

[Your Company Letterhead]

[Date]

[Recipient's Name]

[Recipient's Position]

[Recipient's Company]

[Recipient's Address]

Dear [Recipient's Name],

Subject: Payment Release Authorization

I, [Your Name], [Your Position] at [Your Company], hereby authorize the release of payment in the amount of [Amount] to [Payee's Name] for [Description of Goods/Services].

Please find the relevant invoice attached for your reference.

This payment is to be processed on or before [Due Date].

If you have any questions or require further information, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Position]

[Your Company]

[Your Contact Information]

Enclosure: Invoice #[Invoice Number]