

[Your Name]  
[Your Position]  
[Your Company/Organization Name]  
[Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient's Name]  
[Recipient's Position]  
[Recipient's Company/Organization Name]  
[Address]  
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Authorization for Information Release

I am writing to formally authorize the release of information regarding [specific information or subject] pertaining to [individual or entity's name, if applicable].

As per our discussions and in compliance with relevant privacy regulations, I request that the following information be shared with the designated parties:

- [Item 1]
- [Item 2]
- [Item 3]

This authorization is effective from [start date] and shall remain in effect until [end date] or until revoked in writing.

Thank you for your cooperation in this matter. If you have any questions or require further clarification, please feel free to contact me at [your phone number] or [your email address].

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]  
[Your Position]