[Company Letterhead]

[Date]

[Recipient Name]
[Recipient Title]
[Organization/Bank Name]
[Address Line 1]
[Address Line 2]

Subject: Verification of Authorized Signatories

To Whom It May Concern,

This letter serves to formally certify that the individuals listed below are duly authorized to act, sign, and execute documents on behalf of [Company Name] regarding [Account Number or Specific Transaction Type].

The following person(s) hold the authority to bind the corporation in financial and legal matters as specified in our corporate bylaws or board resolution dated [Date of Resolution]:

- **Name:** [Authorized Signer 1 Name]
  Title: [Job Title]
  Specimen Signature: _____

- **Name:** [Authorized Signer 2 Name]
  Title: [Job Title]
  Specimen Signature: _____

These authorizations shall remain in full force and effect until [Company Name] provides written notice of revocation or amendment to your office.

Should you require any further documentation or verification, please contact [Contact Person Name] at [Phone Number] or [Email Address].

Sincerely,

[Signature]
[Name of Officer/Corporate Secretary]
[Title]
[Company Name]

[Corporate Seal, if applicable]