

**Date:** [Date]

**To:**

[Collection Agency Name]

[Collection Agency Address]

[City, State, Zip Code]

**RE: Assignment of Debt for Collection**

Dear [Contact Name or Agency Representative],

This letter serves as formal authorization for [Collection Agency Name] to act as the authorized agent for [Your Company Name] regarding the collection of the delinquent account(s) listed below:

- **Debtor Name:** [Debtor Name]
- **Account Number:** [Account Number]
- **Total Amount Due:** \$[Amount]
- **Date of Last Payment:** [Date]

You are hereby authorized to take all necessary and legal steps to recover the full balance owed, including interest and late fees where applicable by law.

Please find enclosed all relevant documentation, including copies of invoices, contracts, and previous communication logs related to this debt. Please provide a confirmation of receipt and your assigned internal reference number for this file.

All recovered funds, minus your agreed-upon commission or fees, should be remitted to [Your Company Name] on a [Monthly/Quarterly] basis.

Thank you for your assistance in this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Phone Number]