

[Your Name/Company Name]  
[Your Address]  
[City, State, Zip Code]  
[Date]

[Recipient Name]  
[Recipient Title/Department]  
[Recipient Company Name]  
[Recipient Address]

**Subject: Response to Request for Signatory Authorization**

Dear [Recipient Name],

In response to your request dated [Date of Request] regarding the authorization of legal signatories for [Your Company Name], this letter serves to formally confirm the designated representatives.

The following individual(s) are legally authorized to sign contracts, agreements, and official documents on behalf of the organization:

- **Name:** [Authorized Person 1 Name]  
**Title:** [Job Title]  
**Scope of Authority:** [e.g., All Financial Contracts / Specific Project Name]
- **Name:** [Authorized Person 2 Name]  
**Title:** [Job Title]  
**Scope of Authority:** [e.g., General Operations]

Attached to this letter, please find [mention supporting documents, e.g., Power of Attorney, Board Resolution, or Corporate Bylaws] which formally grants this authority.

These authorizations remain in full effect until [Expiration Date] or until written notice of revocation is provided by this office.

Please update your records accordingly. Should you require further verification or additional documentation, please contact [Contact Person Name] at [Phone Number] or [Email Address].

Sincerely,

[Signature]  
[Printed Name]  
[Title]  
[Company Name]