

To Whom It May Concern,

I, [Your Name], acting in my capacity as [Your Current Title] of [Company/Organization Name], hereby authorize [Name of Authorized Individual] to sign documents and act on behalf of the organization in matters relating to [Specific Project or Department].

The authorized individual holds the title of [Title of Authorized Individual]. Their signature, as shown below, shall be considered legally binding for the purposes mentioned above.

Specimen Signature of Authorized Individual: _____

This authorization is effective as of [Start Date] and shall remain valid until [End Date or "further notice"].

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Job Title]

[Company Name]

[Date]