Date: [Insert Date]

To: [Insert Name of Reimbursing Bank]
Address: [Insert Bank Address]
Swift/Telex: [Insert Swift Code]

Subject: Amendment to Reimbursement Authorization

Reference Number: [Insert Reimbursement Authorization Number]

LC Number: [Insert Issuing Bank's LC Number]

Dear Sir/Madam,

We hereby authorize and request you to amend the above-referenced Reimbursement Authorization as follows:

The following terms are amended:

- **Increase/Decrease of Amount:** The maximum amount authorized is [Increased/Decreased] by [Currency and Amount], making the new total authorized amount [New Total Amount].
- **Expiry Date:** The expiry date for reimbursement claims is extended to [New Expiry Date].
- **Other Amendments:** [Specify any other changes, such as changes to the claiming bank or shipping terms, if applicable].

All other terms and conditions of the original Reimbursement Authorization remain unchanged.

Please notify the Negotiating/Claiming Bank of this amendment immediately.

This amendment is subject to the Uniform Rules for Bank-to-Bank Reimbursements under Documentary Credits (URR 725).

Sincerely,

[Authorized Signature]
[Name and Title of Signatory]
[Name of Issuing Bank]