

Authorization for Disbursement of Funds

Date: [Insert Date]

[Your Name]
[Your Position]
[Your Organization]
[Your Address]
[City, State, Zip Code]

[Recipient's Name]
[Recipient's Position]
[Beneficiary Organization/Individual]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

This letter serves as formal authorization for the disbursement of funds in the amount of [insert amount] to [Beneficiary's Name/Organization] for [purpose of disbursement].

The details of the payment are as follows:

- Amount: [insert amount]
- Date of Disbursement: [insert date]
- Payment Method: [insert payment method]

Please ensure that the funds are disbursed in a timely manner. If you require any further information or documentation, do not hesitate to contact me.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Name]
[Your Position]
[Your Organization]