

Consent for Vendor Invoice Release

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Vendor Name]

[Vendor Address]

[City, State, Zip Code]

Dear [Vendor Name],

I, [Your Name], hereby give my consent for the release of the invoice associated with [Invoice Number/Description] for services/products rendered by [Vendor Company Name].

This authorization allows [Vendor Company Name] to send the invoice directly to [Designated Recipient/Department] in our organization.

Please include any necessary documentation along with the invoice to facilitate processing.

Thank you for your cooperation.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Typed Name]

[Your Contact Information]