

Vendor Payment Authorization Letter

Date: [Insert Date]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Vendor Name]

[Vendor Address]

[City, State, Zip Code]

Dear [Vendor Name],

This letter serves as official authorization for the payment of [Insert Amount] for the services/products provided as per our agreement.

Please ensure that the payment is processed to the following bank account:

- Bank Name: [Insert Bank Name]
- Account Name: [Insert Account Name]
- Account Number: [Insert Account Number]
- Routing Number: [Insert Routing Number]

Should you have any questions regarding this authorization, please feel free to contact me directly at [Your Phone Number] or [Your Email Address].

Thank you for your services and prompt attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]