

Invoice Payment Authorization

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I, [Your Name], hereby authorize the payment of invoice number [Invoice Number] in the amount of [Amount] to be processed on my behalf. This payment is for [brief description of the services/products].

Please find the details of the invoice below:

- Invoice Number: [Invoice Number]
- Invoice Date: [Invoice Date]
- Due Date: [Due Date]
- Total Amount: [Total Amount]

Payment Method: [Payment Method]

Account Number: [Account Number]

Should you require any further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Your Company Address]

[Your City, State, Zip Code]

[Your Phone Number]

[Your Email Address]