

# Authorization Letter for Digital Document Retrieval

Date: \_\_\_\_\_

To Whom It May Concern,

I, [Your Name], hereby authorize [Authorized Person's Name] to retrieve digital documents on my behalf from [Specify Source or Institution].

Details of the documents to be retrieved:

- Document Type: [Type of Document]
- Document Reference Number: [Reference Number]
- Date Range: [Start Date] to [End Date]

This authorization is valid until [Expiration Date] or until it is revoked in writing.

Thank you for your assistance.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Address]

[Your Phone Number]

[Your Email Address]