

Fundraising Collection Authorization Agreement

Date: [Insert Date]

[Your Organization's Name]

[Your Organization's Address]

[City, State, ZIP Code]

[Recipient's Name]

[Recipient's Title/Organization]

[Recipient's Address]

[City, State, ZIP Code]

Dear [Recipient's Name],

We, [Your Organization's Name], are pleased to inform you that we are officially authorized to collect funds on behalf of [Purpose of Fundraising/Event Name]. This fundraising effort will commence on [Start Date] and conclude on [End Date].

We kindly request your support and cooperation in this endeavor. The funds collected will be utilized for [Explain purpose or project briefly]. All contributions will be duly recorded, ensuring transparency and accountability.

Please find attached the necessary documentation and authorization forms for your review. Should you have any questions or require further information, feel free to reach out to us at [Contact Information].

Thank you for your support and consideration.

Sincerely,

[Your Name]

[Your Title]

[Your Organization's Name]

[Your Contact Information]