

# Cross-Border Salary Payment Authorization

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I, [Your Name], the undersigned, hereby authorize [Company Name] to initiate a cross-border salary payment to my bank account as detailed below. This authorization will remain in effect until I provide written notification of cancellation.

## Employee Details:

Name: [Your Full Name]

Employee ID: [Your Employee ID]

Department: [Your Department]

## Bank Account Details:

Account Holder Name: [Your Full Name]

Bank Name: [Your Bank Name]

Account Number: [Your Account Number]

SWIFT/BIC Code: [Your Bank's SWIFT/BIC]

Bank Address: [Your Bank's Address]

Please process my salary payments in accordance with this authorization.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if required)]

[Your Printed Name]

[Your Contact Information]

[Your Job Title]