Partnership Agreement Decision Confirmation

| Date: [Insert Date] |
|---|
| To: [Partner's Name] |
| [Partner's Address] |
| [City, State, Zip Code] |
| Dear [Partner's Name], |
| We are pleased to confirm our decision regarding the partnership agreement established between [Your Company Name] and [Partner's Company Name]. After careful consideration and discussion, we have agreed on the following terms: |
| Partnership Purpose: [State the purpose of the partnership] Roles and Responsibilities: [Outline each party's roles and responsibilities] Profit Sharing: [Specify how profits will be shared] Duration: [Indicate the duration of the partnership] Termination Clause: [Outline the procedure for terminating the partnership] |
| We believe this partnership will be mutually beneficial and look forward to a successful collaboration. Please confirm your acceptance of this agreement by signing below. |
| Sincerely, |
| [Your Name] |
| [Your Position] |
| [Your Company Name] |
| [Your Contact Information] |
| Acceptance |
| By signing below, I, [Partner's Name], accept the terms stated above: |
| [Partner's Signature] |

| Date: | | | |
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