

Agency Partnership Agreement Review

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Partner's Name]

[Partner's Position]

[Partner's Company Name]

[Partner's Company Address]

[City, State, Zip Code]

Dear [Partner's Name],

I hope this message finds you well. As per our previous discussions, we have conducted a comprehensive review of the Agency Partnership Agreement. Our objective is to ensure that all terms are clear and mutually beneficial.

The key aspects we would like to address include:

- Scope of Services
- Revenue Sharing Model
- Duration of Agreement
- Termination Clause
- Confidentiality Obligations

Please find attached our suggested amendments and comments for your consideration. We believe these changes will strengthen our partnership and clarify our collaborative efforts.

We look forward to discussing this further and finalizing the agreement at your earliest convenience. Please feel free to reach out if you have any questions or need additional information.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]