

Contract Signatory Authorization Letter

Date: [Insert Date]

To: [Insert Recipient's Name]

[Insert Recipient's Address]

[Insert City, State, Zip Code]

Dear [Insert Recipient's Name],

Subject: Authorization for Contract Signatory

We hereby authorize [Insert Authorized Person's Name], [Insert Title/Position], to act as the official signatory on our behalf for all procurement contracts entered into with [Insert Company/Organization Name]. This authorization includes but is not limited to the signing of contracts, agreements, and any necessary documentation related to procurement activities.

This authorization is effective as of [Insert Effective Date] and will remain in effect until further notice.

Should you have any questions or require further information, please do not hesitate to contact us at [Insert Contact Information].

Thank you for your attention to this matter.

Sincerely,

[Insert Your Name]

[Insert Your Title/Position]

[Insert Your Company/Organization Name]

[Insert Your Phone Number]

[Insert Your Email Address]