

Authorization Letter for Financial Decision-Making

Date: [Insert Date]

To Whom It May Concern,

I, [Your Full Name], residing at [Your Address], hereby authorize [Authorized Person's Full Name], residing at [Authorized Person's Address], to make financial decisions on my behalf.

This authorization includes, but is not limited to, the following:

- Managing my bank accounts
- Making investments
- Approving or denying financial transactions
- Communicating with financial institutions

This authorization is valid from [Start Date] to [End Date] unless revoked in writing prior to the end date.

Thank you for your assistance.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Contact Information]