Consent for Financial Decision-Making Authority

Date:
To Whom It May Concern,
[, [Your Full Name], residing at [Your Address], hereby grant [Recipient's Full Name], residing at [Recipient's Address], the authority to make financial decisions on my behalf.
This consent is effective as of [Effective Date] and will remain in effect until [End Date or 'revoked in writing''].
understand that this authority includes, but is not limited to, managing bank accounts, making nvestments, paying bills, and handling financial transactions.
By signing below, I affirm that I am of sound mind and free from any undue influence in granting this authority.
Sincerely,
Your Full Name]
[Your Signature]