Financial Adviser Authorization for Estate Planning

| Date: [Insert Date] |
|---|
| To: [Financial Adviser's Name] |
| [Financial Adviser's Company] |
| [Company's Address] |
| [City, State, ZIP Code] |
| Dear [Financial Adviser's Name], |
| I, [Your Full Name], residing at [Your Address], hereby authorize you to act on my behalf in matters relating to the planning and management of my estate. This authorization allows you to make financial decisions and provide recommendations regarding my estate planning strategies including but not limited to wills, trusts, and any associated financial products. |
| This authorization is effective immediately and will remain in effect until revoked in writing by me. I trust your expertise and judgment in these matters and appreciate your assistance in this important process. |
| Thank you for your support. |
| Sincerely, |
| [Your Signature] |
| [Your Printed Name] |
| [Your Contact Information] |
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