Investment Account Management Authorization

Date: [Insert Date]

To Whom It May Concern,

I, [Your Full Name], the [Relationship to Deceased] of the late [Deceased Full Name], hereby authorize [Authorized Individual's Full Name] to manage and oversee the investment accounts held in the name of the estate of [Deceased Full Name], including but not limited to the following accounts:

- Account Number: [Insert Account Number]
- Institution: [Insert Financial Institution Name]

This authorization grants [Authorized Individual's Full Name] the authority to make all necessary transactions, decisions, and communications on behalf of the estate concerning these investment accounts. This authorization shall remain in effect until revoked by me in writing.

Attached herewith are copies of my identification and the death certificate of [Deceased Full Name] for verification purposes.

Should you require any further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Signature]

[Your Full Name]

[Your Address]