**BANK AUTHORIZATION LETTER**

Linda Smith
130 Stewart Rd.
Jackson, Ohio 45640

August 04, 20XX

Oak Hill Banks
12567 St. Rt. 327
Wellston, Ohio 45692

Dear Ms. Jones:

I am writing regarding my account number **[345610]** that I have with your institution. I have had this account for several years and have enjoyed being a member of this fine bank.

I am having some health issues and will have to undergo a major medical procedure. I need to ask that **[Lisa Smith]**, my daughter, be appointed representative over my account during my medical down time.

Please allow Lisa to make deposits, withdraw cash, purchase money orders or cashier’s checks and to have full access to my account. I also have 2 safety deposit

boxes with your bank, but she doesn’t need access to those at this time.

Should I not make it through the surgical procedures, my will allows her access to these boxes. This authorization should be granted from today, August 04, 20XX until December 1st, 20XX unless otherwise notified.

I appoint **[Lisa Smith]** at **[9090 David Ave. Jackson, Ohio 45640]** to handle my banking. You can reach me on my cell phone at **[555-890-XXXX]** if you have any questions. I look forward to continuing my services with you banking institution.

Sincerely,

Linda Smith