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| |  | | --- | | **Authority Letter** Release Information |  |  | | --- | | To  [Receiver Name]  [Receiver Title]  [Addess]  [Email] | |  | | From  [Sender Name]  [Sender Title]  [Addess]  [Email] | | |  | | --- | |  | |  | | Dear [Financial Institution's Name],  I, [Your Name], hereby authorize [Financial Institution's Name] to disclose specific financial information related to my accounts with them to [Third Party's Name], for the purpose of. The financial information to be disclosed may include but is not limited to account balances, transaction history, and account details.  This authorization shall be valid from [start date] to [end date] unless otherwise specified or revoked in writing.  Please ensure that the information is handled securely and used solely for the designated purpose.  If you require any further information or have any concerns, please contact me at [Your Email Address] or [Your Phone Number].  Thank you for your assistance.  Sincerely,  [Your Full Name]  [Your Signature] | |