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| |  | | --- | |  | | **Authority Letter**  Process Documents on My Behalf | |  | | To  [Receiver Name]  [Receiver Title]  [Addess]  [Email] | |  | | From  [Sender Name]  [Sender Title]  [Addess]  [Email] | | |  | | --- | |  | |  | | **Subject:** Authorization Letter to Process Documents on My Behalf | | Dear Mr. Smith, | | I, Jane Doe, residing at 456 Elm Road, Country town, Statesville, ZIP 23456, hereby authorize and appoint Michael Johnson as my authorized representative and agent to process documents on my behalf. Michael Johnson will have the authority to act on my behalf in all matters related to processing legal documents. | |  | | This authorization is valid from August 15, 20XX, to October 31, 20XX, unless otherwise specified. During this period, Michael Johnson is granted full authority to:     * Submit, collect, and receive any necessary documents or information. * Sign on my behalf for any documents related to the purpose. * Perform any actions necessary to facilitate the processing of the documents.     I understand that I will be held responsible for any actions taken by Michael Johnson within the scope of this authorization. | |  | | Please provide Michael Johnson with any assistance or information he may require performing his duties efficiently on my behalf. Furthermore, I request your understanding and cooperation in recognizing the validity of this authorization letter.  I am enclosing a copy of my identification card for verification purposes. Should you have any questions or require additional information, please do not hesitate to contact me at (555) 123-4567 or yourname@email.com.  Thank you for your attention to this matter.  Sincerely,  Jane Doe | |  | |