**Authorization Letter to Release Information**

**[SENDER'S NAME]**

**To**

[Recipient's Name]

[Recipient's Address]

[City, State, ZIP]

**From**

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Contact no]

[Date]

Dear [Recipient's Name],

 I, [Your Name], am writing this letter to grant authorization to [Agent's Name], who is acting as my authorized representative ("Agent"), to request and receive information on my behalf from your organization, [Recipient's Organization]. The purpose of this authorization is to facilitate the disclosure and exchange of relevant information necessary for [Agent's Name] to act on my behalf in matters pertaining to [mention the purpose or context, e.g., legal representation, financial matters, etc.].

 I hereby authorize [Agent's Name] to access, review, and collect any documents, records, or information related to my account, files, or any other relevant information held by your organization. [Agent's Name] is also permitted to sign any necessary documents or agreements that may be required to complete the process or fulfill the purpose of this authorization.

 This authorization is effective from the date of this letter and will remain valid until [mention end date if applicable or specify "until further notice"]. If there are any changes or updates to this authorization, I will promptly inform your organization in writing.

 Please ensure that [Agent's Name] is provided with all the necessary assistance and cooperation required to carry out their responsibilities as my authorized representative. I trust that you will act in accordance with the laws and regulations regarding the release of information and ensure the confidentiality and security of any personal or sensitive information shared with [Agent's Name].

 **For verification purposes, please find below the details of my information:**

 Full Name: [Your Name]

Date of Birth: [Your Date of Birth]

Address: [Your Address]

Contact Number: [Your Contact Number]

 Thank you for your prompt attention to this matter. Should you require any further information or have any questions regarding this authorization, please feel free to contact me at the provided contact information.

 Sincerely,

[Your Name]

[Your Signature if sending a physical copy]

Enclosure: [List any supporting documents if required]