

[Your Company Letterhead]
[Company Name]
[Street Address]
[City, State ZIP Code]
[Phone Number]
[Email Address]

Date: _____

To:
[Recipient's Name or Department]
[Recipient's Company/Organization]
[Recipient's Address]

Subject: Authorization for Release of Blank Document

Dear [Recipient's Name],

I, _____ [Your Name], hereby authorize the release of the following blank document(s) as requested:

- Document Type: _____
- Reference Number (if any): _____
- Purpose of Release: _____

This authorization is granted with the understanding that the document(s) will be used solely for the purpose stated above.

Please contact me at [phone number or email] if further clarification is needed.

Sincerely,

Signature
Name: _____
Title: _____

For Office Use Only
Date of Release: _____
Authorized By: _____