

## Authorization Certificate

To Whom It May Concern,

This is to certify that  is hereby authorized by  to act on their behalf in matters pertaining to .

The authorization is valid from  to .

Authorized Person's Contact Number:

**Authorized By:**

Name:

Signature:

Date:

**Authorized Person:**

Name:

Signature:

Date:

**Note:** This certificate has been issued as per the request of the concerned party and holds validity only for the stated purpose and period.