Authorization Letter to Claim

**[Your Full Name]**  
**[Your Address]**  
**[City, State, Zip Code]**  
**[Email Address]**  
**[Phone Number]**  
**[Date]**

**[Recipient’s Full Name or Company’s Name]**  
**[Recipient’s Address]**  
**[City, State, Zip Code]**

**Subject: Authorization to Claim [Specify Item/Document]**

Dear [Recipient’s Name or Company’s Title],

I, [Your Full Name], hereby authorize [Designated Person’s Full Name], holding Identification Number [ID Number], to claim [Specify the item, document, or other entities] on my behalf.

Due to [reason for inability to claim, e.g., personal commitments, health reasons], I am unable to be present personally. Therefore, I entrust [Designated Person’s Full Name] with full authority to act in all matters related to the claim of the aforementioned item/document.

For verification purposes, I have attached a copy of my identification [Specify ID type, e.g., Driver’s License, Passport] along with this letter. [Designated Person’s Full Name] will also present their identification [Specify ID type] for further validation.

This authorization is valid from [Start Date] to [End Date], during which [Designated Person’s Full Name] shall have the right to sign documents, receive items, and perform any necessary actions on my behalf.

Should you require any additional information or clarification, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your cooperation and understanding.

Sincerely,

**[Your Signature (if sending a hard copy)]**  
**[Your Printed Name]**