

**LETTER OF AUTHORIZATION**

**Philippine Statistics Authority**

Date: MM-DD-YYYY

TO WHOM IT MAY CONCERN:

I, <full name of the document owner>, authorize <full name of the representative/include relationship to the document owner> to apply and collect PSA certificate(s) with the following details:

- |                            |                            |
|----------------------------|----------------------------|
| 1. Type of PSA Certificate | Name of the Document Owner |
| 2. Type of PSA Certificate | Name of the Document Owner |
| 3. Type of PSA Certificate | Name of the Document Owner |

The above-mentioned PSA certificates will be used for <indicate purpose/use of the certificate>.

I have enclosed necessary Identification cards as proof of my authorization to do so.

Thank you.

**<Signature over Printed Name of the Document Owner>**