(**First-party’s Name**)

(Address)

(City, Zip code)

(Date)

**Philippine Statistic Authority**

(Address)

(City, Zip code)

To Whom It May Concern:

I, ***(first-party’s name****)*, do hereby authorize my ***(relation to bearer****)*, Mr./Mrs. *(****insert name of representative****)*, to claim my (***insert name of PSA document)*** as I am unavailable due to ***(state reason of absence)*.**

Attached herewith is my (***name of 2 valid IDs****)* as proof of my consent on this matter. The bearer will also show his/her (***name of the bearer’s valid ID)*** for verification purposes

Thank you very much and looking forward to your consideration. For concerns and questions regarding the transaction, you may contact me at (***insert phone number)***.

Sincerely,

*(****signature over printed name****)*