

Date: __ __ __

Letter of Authorization

Credit/ debit card payment option for availing Siemens Industry Services

We _____ (organization's name), hereby authorize our employee Mr/ Ms. _____ (employee's name) to make payment for availing _____ (service description) on our company's behalf through his/her debit or credit card No. **** * * * * _____ (write only last four digits) of Bank _____ (Bank Name).

We further confirm that Mr/ Ms. _____ (employee's name) is an employee of our organization as on date __ __ __ (date of transaction) and is being authorized by us to receive/ avail and pay for the _____ (service description) on our behalf.

Company Seal

Authorized Signatory
(Name and signature)

* Please provide this authorization letter in your company's letter head

Unrestricted