Company Name
Company Address
City, State Zip
Company Name
Company Website

**LETTER OF AUTHORIZATION**

Date:

Subject: " Company Name" Reseller Authorization

To whom it may concern:

This letter is to authorize the following company to work as a reseller of "Company Name" products on Amazon.com:

**Name: [Your Legal Company Name - as registered with Amazon Account Info]**

**Address: [Your Legal Business Address - as registered with Amazon Account Info]**

**[City, State Zip]**

**Phone: [Your Company Phone Number - We use same as account info]**

**Email: [we use our registered Amazon email address]**

This letter serves as authorization to verify that [Your Legal Company Name - as registered with Amazon Account Info] (DBA Your Amazon Storefront Name) is an authorized seller for "Company Name" on Amazon.com.

Please contact us directly to verify any information on this Letter of Authorization.

Sincerely,

Company Contact

Position

Company Name

Company Address
City, State Zip

Company Email
Company Website

Signature