

[Your Name/Law Firm Name]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Expert Name]
[Expert Title/Company]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]

RE: Formal Letter of Instruction - Forensic Document Examination

Matter: [Case Name/Reference Number]

Subject: Verification of Signatures on Power of Attorney Documents

Dear [Expert Name],

I am writing to formally instruct you to act as an independent forensic handwriting expert in the above-referenced matter. We require your professional opinion regarding the authenticity of signatures appearing on a specific Power of Attorney (POA) document.

1. Background

The dispute concerns a Power of Attorney dated [Date of Disputed Document], purportedly signed by [Name of Principal]. It is alleged that the signature on this document is not genuine.

2. Documents Provided

Accompanying this letter are the following documents:

- **Questioned Document (Exhibit A):** A [copy/original] of the Power of Attorney dated [Date].
- **Known Exemplars (Exhibit B):** [Number] samples of [Name of Principal]'s authentic signatures from the following sources: [e.g., Passport, Bank Checks, Deeds dated between Year and Year].

3. Scope of Work / Questions to be Addressed

We request that you conduct a detailed comparative analysis and provide a written report addressing the following:

- Whether, in your professional opinion, the signature on the Questioned Document was written by the same person who provided the Known Exemplars.
- An assessment of any evidence of forgery, tracing, simulation, or physical duress.

- The degree of certainty for your findings based on the scale of probability used in forensic document examination.

4. Compliance and Deadlines

Please ensure your report complies with [Insert Relevant Court Rules, e.g., Federal Rule of Civil Procedure 26(a)(2)(B)]. We require your preliminary findings by [Date] and your final signed report by [Date].

5. Fees

Your services will be remunerated in accordance with your fee schedule dated [Date]. [Reference Retainer if applicable].

Please acknowledge receipt of these instructions and the enclosed documents.

Yours sincerely,

[Your Signature]

[Your Printed Name]