Authorized Billing Change Confirmation

Date: [Insert Date]
To: [Customer Name]
[Customer Address]
[City, State, Zip Code]
Dear [Customer Name],
This letter is to confirm the recent changes made to your billing information as authorized by you on [Insert Date of Authorization]. The details of the changes are as follows:
Previous Billing Information:
Account Number: [Previous Account Number]
Billing Address: [Previous Billing Address]
New Billing Information:
Account Number: [New Account Number]
Billing Address: [New Billing Address]
If you have any questions or concerns regarding this change, please do not hesitate to contact our customer service department at [Customer Service Phone Number] or [Customer Service Email Address].
Thank you for your continued business.
Sincerely,
[Your Name]
[Your Title]
[Company Name]
[Company Address]