

Billing Cycle Alteration Confirmation

Date: [Insert Date]

Customer Name: [Insert Customer Name]

Customer Address: [Insert Customer Address]

Account Number: [Insert Account Number]

Dear [Customer Name],

We are writing to confirm the alteration to your billing cycle as per your request. Your new billing cycle will commence on [Insert Start Date] and will be billed on a [monthly/quarterly/annual] basis.

Please find the details of your new billing cycle outlined below:

- New Billing Cycle Start Date: [Insert Start Date]
- Billing Frequency: [monthly/quarterly/annual]
- Next Billing Date: [Insert Next Billing Date]

If you have any questions or require further assistance, please do not hesitate to contact our customer service department.

Thank you for your continued patronage.

Sincerely,

[Your Company Name]

[Your Company Contact Information]