

Payment Instrument Disclosure

Date: [Insert Date]

Dear [Cardholder Name],

We are writing to provide you with important information regarding your credit card account with us. This letter serves as a disclosure of the payment instruments associated with your credit card.

Payment Instrument Details

- Card Type: [Insert Card Type]
- Account Number: **** * [Last Four Digits]
- Credit Limit: [Insert Credit Limit]
- Annual Percentage Rate (APR): [Insert APR]

Fees

- Annual Fee: [Insert Amount]
- Late Payment Fee: [Insert Amount]
- Cash Advance Fee: [Insert Amount or Percentage]

Payment Terms

Your minimum payment is [Insert Amount] or [Percentage] of your balance, whichever is greater, due on [Insert Due Date].

Contact Information

If you have any questions regarding this disclosure, please contact our customer service at [Insert Phone Number] or [Insert Email Address].

Thank you for being a valued customer.

Sincerely,

[Your Company Name]