

Payment Instrument Disclosure

Date: [Insert Date]

To: [Insert Cardholder Name]

[Insert Address]

Dear [Insert Cardholder Name],

We are pleased to provide you with the Payment Instrument Disclosure for your prepaid card. This document outlines important information regarding the fees, usage, and protections associated with your card.

Card Information

- Card Type: [Insert Card Type]
- Account Number: [Insert Account Number]
- Expiration Date: [Insert Expiration Date]

Fees

Below are the fees associated with your prepaid card:

- Activation Fee: [Insert Amount]
- Monthly Maintenance Fee: [Insert Amount]
- ATM Withdrawal Fee: [Insert Amount]
- Transaction Fee: [Insert Amount]

Usage Guidelines

Your prepaid card can be used for:

- In-store purchases
- Online transactions
- Paying bills

Protections

We offer the following protections with your prepaid card:

- Fraud protection measures
- Lost or stolen card reporting

- Limited liability on unauthorized transactions

Contact Information

If you have any questions or need assistance, please contact our customer service at [Insert Contact Number] or visit our website at [Insert Website URL].

Thank you for choosing [Insert Company Name]. We look forward to serving you.

Sincerely,

[Insert Company Name]

[Insert Company Contact Information]