

Authorization Letter for Credit Card Change

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Recipient's Name]
[Company Name]
[Company Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I, [Your Name], hereby authorize the change of my credit card information associated with my account.

Current Credit Card Information:

Cardholder Name: [Current Cardholder Name]
Card Number: [Current Card Number]
Expiration Date: [Current Expiration Date]

New Credit Card Information:

Cardholder Name: [New Cardholder Name]
Card Number: [New Card Number]
Expiration Date: [New Expiration Date]

By signing below, I confirm that all information provided is accurate and that I authorize the processing of this change.

Signature: _____
Printed Name: [Your Printed Name]
Date: _____

Thank you for your assistance.

Sincerely,
[Your Name]