

# Credit Card Authorization Agreement

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are writing to confirm the agreement regarding the credit card authorization for future transactions. By signing this letter, you authorize [Your Company Name] to process payments using the following credit card details:

## Credit Card Details

**Cardholder Name:** [Cardholder's Name]

**Card Type:** [Visa/MasterCard/American Express]

**Card Number:** [XXXX-XXXX-XXXX-XXXX]

**Expiration Date:** [MM/YYYY]

**CVV:** [XXX]

By signing below, you acknowledge that the above information is accurate and authorize [Your Company Name] to charge the provided credit card for the agreed-upon services and products.

Thank you for your prompt attention to this matter. Please sign and return a copy of this agreement.

## Authorization

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Signature

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Printed Name

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Date

If you have any questions or concerns, please do not hesitate to contact us at [Your Contact Information].

Sincerely,

[Your Name]

[Your Title]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]