

# Co-Signer Liability Agreement

Date: [Insert Date]

To Whom It May Concern,

I, [Co-Signer's Full Name], residing at [Co-Signer's Address], hereby acknowledge my role as a co-signer on the credit card account issued to [Primary Cardholder's Full Name] with Account Number: [Account Number].

I understand that as a co-signer, I am jointly responsible for the repayment of all charges made to this account. This includes any fees, interest, and other obligations that may arise due to the use of this credit card by the primary cardholder.

By signing this letter, I agree to be liable for the credit extended on this account and understand that failure to pay gracefully could result in a negative impact on my credit report.

Signature: \_\_\_\_\_

Printed Name: [Co-Signer's Full Name]

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

Thank you.