Letter of Intent

Date: [Insert Date]

[Your Name] [Your Address] [City, State, Zip Code]

[Bank/Credit Card Company Name] [Customer Service Department] [Company Address] [City, State, Zip Code]

Dear [Customer Service Team],

I am writing to formally request a change in the billing frequency of my credit card account, [Your Account Number]. I would like to change my billing cycle from [current billing frequency, e.g., monthly] to [desired billing frequency, e.g., bi-monthly].

This change is intended to better align with my financial planning and cash flow requirements. Please let me know what steps I need to take to facilitate this change.

Thank you for your assistance. I look forward to your prompt response.

Sincerely,

[Your Name] [Your Phone Number] [Your Email Address]