

Credit Card Account Authenticity Verification

Date: [Insert Date]

To whom it may concern,

This letter is to confirm the authenticity of the credit card account referenced below:

- Cardholder Name: [Insert Cardholder Name]
- Credit Card Number: [Insert Last Four Digits]
- Account Type: [Insert Account Type]
- Bank Name: [Insert Bank Name]
- Date of Issue: [Insert Date of Issue]

We hereby affirm that the above information is accurate and valid as of the date mentioned. Please do not hesitate to contact us if you require further verification.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Company/Organization]

[Contact Information]