

Request for Automatic Credit Card Billing Initiation

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 hope this message finds you well. I am writing to request the initiation of automatic billing to my credit card for my account with [Company Name]. My account details are as follows:

Account Number: [Your Account Number]

Credit Card Type: [Visa/MasterCard/etc.]

Card Number: [Last Four Digits of Card Number]

Expiration Date: [MM/YY]

I would like my monthly charges to be automatically deducted on the [Specify Date] of each month. Please confirm the initiation of this service at your earliest convenience.

Thank you for your assistance.

Sincerely,

[Your Name]