

Credit Card Grace Period Eligibility Confirmation

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

Dear [Customer's Name],

We are pleased to inform you that you are eligible for the grace period offered on your credit card account ending in [last four digits of the credit card]. This grace period allows you to pay your balance in full by the due date to avoid interest charges on your new purchases.

Please note the following details regarding your grace period:

- Account Number: [Your Account Number]
- Grace Period Duration: [Insert Duration]
- Due Date for Current Billing Cycle: [Insert Due Date]

We appreciate your timely payments and commend you for maintaining your account in good standing. If you have any questions regarding your account or the grace period, please do not hesitate to contact us at [Customer Support Phone Number] or [Customer Support Email].

Thank you for being a valued customer.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

[Company Contact Information]