

# Credit Card Authorization for Recurring Payments

To Whom It May Concern,

I, **[Your Full Name]**, hereby authorize **[Company Name]** to charge my credit card for recurring payments as specified below:

## Credit Card Information:

- Cardholder Name: **[Your Name]**
- Card Number: **[XXXX-XXXX-XXXX-XXXX]**
- Expiration Date: **[MM/YYYY]**
- CVV: **[XXX]**

## Recurring Payment Details:

- Amount: **[Payment Amount]**
- Frequency: **[Monthly/Quarterly/Yearly]**
- Start Date: **[Start Date]**
- Duration: **[Duration of Payments]**

I understand that this authorization will remain in effect until I cancel it in writing, and that I must provide written notice of at least **[XX days]** to **[Company Name]** of my intent to cancel.

Thank you for your attention to this matter.

Sincerely,

**[Your Signature]**

[Your Printed Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]