

Business Credit Card Statement Form

Business Information

Company Name

Address

Phone Number

Email

Statement Period MM/DD/YYYY - MM/DD/YY

Credit Card Information

Cardholder Name

Card Number

Expiration Date MM/YY

Statement Summary

Previous Balance

Payments/Credits

New Charges

Fees

Finance Charge

New Balance

Transaction Details

Date	Description	Reference #	Amount

Remarks

(Optional)

Authorized Signature

Date