



Recurring Payment Authorization Form

If you would like to enjoy the convenience of automatic recurring billing, simply complete the Credit Card information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information:

Customer name: _____

E-mail address: _____ Phone: _____

Payment Information:

I authorize Symplified Technologies LLC to automatically bill the card listed below as specified:

Product/service description: Internet Services

Recurring amount: \$ _____

Frequency: Monthly Quarterly Annually

Start on: _____ No end date

Credit Card Information:

Card type: MasterCard Visa

Cardholder name: _____ Cardholder ZIP Code: _____

Card number: _____ Expiration: _____

Card Billing Address: _____

Notify me via e-mail when my credit card is charged. (Make sure email address above is correct.)

- I am aware that to cancel automatic payments I need to call Symplified Technologies LLC at 509-852-2084 one week prior to card charge date.

Signature

Date