



Bank Draft (ACH) or Credit Card Authorization Agreement
 (Must Complete Sections 1 & 4, and either Section 2 or Section 3)

Section 1 - PAYOR IDENTIFICATION

<input type="checkbox"/> Employee Social Security Number, or <input type="checkbox"/> Federal Employer's Identification Number: _____ Company Name: _____	
Payor Name(s) _____	
Address _____	
City, State ZIP _____	Phone (with area code) _____

I (we) hereby authorize MeatBooks, Inc., Columbia, MO, hereinafter called COMPANY, to initiate debit entries in the amount of \$ _____ per month beginning _____ to my (our) Checking Savings Credit Card account (select one) in our financial institution named below, hereinafter called FINANCIAL INSTITUTION, and to debit same from such account. An additional \$ _____ Will Will Not be debited on _____ to pay for the initial down payment (Installation Fee). I (we) acknowledge that the origination of transactions from my (our) account must comply with the provisions of U.S. law. This authority is to remain and continue in full force and effect until COMPANY has received written notification from me (us) of its termination in such time and in such manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it. I DO DO NOT want a Monthly "E-mail Confirmation" of this transaction (ACH/Bank Draft only) E-mail: _____

Section 2 -- AUTHORIZATION FOR AUTOMATIC DEBIT FROM BANK ACCOUNT (ACH)
 (ACH = "Automated Clearing House")

Financial Institution _____		Branch _____
Bank Address: Street _____ City, State ZIP _____		
Bank Routing # _____	Account # _____	
Name(s) _____		
Signed X _____		Signed X _____
If Choosing ACH, Please Attach a Voided Check Voided Check Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Section 3 – AUTHORIZATION FOR AUTOMATIC DEBIT FROM CREDIT CARD

Name as it appears on Credit Card: _____

Master Card Acct. # _____ Exp Date _____ / _____

VISA Acct. # _____ Exp Date _____ / _____

Discover Acct. # _____ Exp Date _____ / _____

Signed **X** _____ Signed **X** _____ Date: _____

Section 4 – ACKNOWLEDGEMENT/NOTES

1. Payor is required to notify COMPANY when information affecting the payment of this Lease changes (i.e. change of Bank, bank account number, name(s) of Payor, Credit Card Expiration Date, etc.)
2. Notice must be given in writing to: MeatBooks, Inc, Bldg 5- Suite 203, 409 Vandiver Drive, Columbia, MO 65202, or FAX: 1-866-458-7598.
3. All payments (Debits) will be made on the first business day of each month.

Signed **X** _____ Signed **X** _____ Date: _____