Payment Authorization Form

In order to facilitate payment procedures, it is our policy to fill out this page for any recurring payment. Payments will be deducted automatically on the agreed amount and date. It's easy to set up and your payments will take care of themselves. Simply complete and sign the form below to get started!

Here's How the Payment Plan Works:
We decide on a mutually agreed amount and number of payments and schedule. You authorize regularly scheduled charges to your checking/savings account or credit card on the specified date. An email receipt from QuickBooks with the payment details will be sent for each payment. When the total due is collected and if it's not a recurring service, the schedule ends, and the authorization is terminated.

Please complete the information below:

Total Due: _____   Payment Frequency: ☐ Weekly ☐ Monthly ☐ Annually

Recurrent Amount: _____   Start Date: _____

Payment Amount: _____

☐ I have read and agree to the terms and conditions of the services offered by Logicmasys found at logicmasys.com/terms/

I _____ authorize **LOGICMASYS CORP** to charge my account indicated
        (full name)

below to discharge the above debt for _____, using installment payments in the
                                        (Description of goods/services)
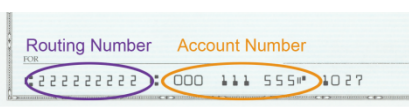amount and schedule indicated.

Billing Address _____   Phone# _____

City, State, Zip _____   Email _____

Checking Account (ACH)   ## Credit Card

Name on Acct _____   ☐ Visa   ☐ MasterCard

Bank Name _____   ☐ AMEX   ☐ Discover

Account Number _____   Cardholder Name _____

Bank Routing # _____   Account Number _____

Bank City/State _____   Exp. Date _____

Routing Number   Account Number
FOR
⑆222222222⑆ ⑈000 111 555⑈ 1027

CVV (3 digit number on back of card) _____

Zip Code _____

SIGNATURE _____   DATE _____