


## Authorization for Leclerc Group Automatic Payments

Schedule your payments to be automatically deducted from your bank account, or charged to your Visa, MasterCard, American Express, or Discover Card. You will receive a copy of your invoice in advance, notifying you of the upcoming amount and date of your next automatic payment. Just complete and sign this form to get started!

I authorize Leclerc Group to process automatic monthly electronic payments using the account information below. I understand that I may cancel this authorization at any time by contacting Leclerc Group. This authorizes the financial institution holding the account to post all such entries:

### Bank Account Payments:

<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Name on Account: _____	
Name of Bank: _____	
Account Number: _____	
Routing Number: _____	
	
<i>* Please attach a copy of voided check</i>	

### Credit Card Payments:

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
<input type="checkbox"/> Amex	<input type="checkbox"/> Discover
Cardholder Name: _____	
Account Number: _____	
Exp. Date: _____	
CSV Code: _____	
Billing Address: _____	
City, State, Zip: _____	

This authorization will remain in effect until Leclerc Group Accounting & Payroll receives written notice from said account holder, and has a reasonable opportunity to act on it.

PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**Simply email, mail, or fax this authorization form to us today! We will send you a detailed invoice approximately 10 days before every scheduled automatic payment.**