



## Recurring Payment Authorization Form

Complete and return this form to [accounting@amci-wireless.com](mailto:accounting@amci-wireless.com) or 303-271-9777 (fax) to get started!

**Recurring Payments Will Make Your Life Easier.** Tired of writing checks each month... schedule your payment to be automatically be charged to your Visa, MasterCard, American Express or Discover Card! It's a convenient way to ensure uninterrupted services, while saving you time and money on postage and handling.

**Customer ID and / or Recent Invoice Number** \_\_\_\_\_

I authorize American Millennium Corporation, Inc. DBA AMCi Wireless to initiate a payment using the authorized Credit Card listed below, on or after the due date of the associated invoices.

AMCi Wireless may charge the following types of invoice from my account:

Monthly Alarm / Airtime charges – Up to \$\_\_\_\_\_ each month (charged in full if blank)

Equipment / Accessories – Up to \$\_\_\_\_\_ each shipment (charged in full if blank)

**Cardholder Name** \_\_\_\_\_

**Card Number** \_\_\_\_\_

**Expiration Date (mm/yy)** \_\_\_\_\_ **CVV Code** \_\_\_\_\_ **Card Type** \_\_\_\_\_

**Billing Address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

### How would you like to receive your invoice / receipt?

E-mail \_\_\_\_\_

Fax \_\_\_\_\_

Mail (\$5 mailing fee) \_\_\_\_\_

Name / Title \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify AMCi Wireless in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I acknowledge that the origination of Credit Card transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this card and will not dispute these scheduled transactions with my bank; so long as the transactions correspond to the terms indicated in this authorization form.