

920 Media
410 S Orchard St Suite 180
Boise, ID 83705
208-297-7930 Fax
support@920media.com

One Time Payment Authorization Form

Schedule your payment to be automatically deducted from your bank account, or charged to your Visa, MasterCard or Discover Card. Just complete and sign this form to get started!

Here's How Payments Work:

You authorize a onetime charge to your checking/savings account or credit card. You will be charged the amount indicated below. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I _____ authorize 920 Media to charge my credit card.
(full name)

indicated below for \$_____ on the receipt.

For _____ Leads Promo Code _____

Please circle the lead Type Life Insurance Final Expense Annuity

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Credit Card

☐ Visa

☐ MasterCard

☐ Discover

Cardholder Name _____

Account Number _____

Exp. Date _____ CVC _____

SIGNATURE _____

DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify 920 Media 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. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that 920 Media may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25.00 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form.