3505 Veterans Highway Suite O
Ronkonkoma, NY 11779
(631) 617-5060

Credit Card Recurring Payment Authorization Form

Company: **1**
test

Schedule your payments to be automatically charged to your credit card. Just complete and sign this form to get started!

Here's How Recurring Payments Work:
You authorize regularly scheduled charges to your Visa, MasterCard, American Express or Discover card. You will be charged each billing period for the total amount due for that period.

Your Frequency:
Recurring Charge Amount: **Juiced Technologies, Inc**
3505 Vets Highway
Ronkonkoma, NY 11023

Please complete the information below:

I _____ authorize Juiced Technologies, Inc. to charge my credit card indicated

Billing Address _____

City, State, Zip _____

Phone# _____

Email _____

Credit Card Type:

Cardholder First Name _____Cardholder Last Name _____

Card Number _____

Expiration Date _____

CVV (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

Signature _____ **Date** _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. 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 understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.