

## Recurring Payment Authorization Form

If you would like to enjoy the convenience of automatic recurring billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

### Customer Information (to be completed by merchant)

Customer/company CHARLES HENRY PROPERTIES  
Contact name CLAUDE SIMON Account number \_\_\_\_\_  
Email address csimon@fairlane.biz Phone (845) 796 - 9140 Ext: \_\_\_\_\_

### Payment Information (to be completed by merchant)

I authorize SiteCompli, LLC to automatically bill the card listed below as specified:

Product/service description compliance monitoring technology

Recurring amount \$ 50/month + tax

Frequency (check one) ☐ Annually ☒ Semi-Annually ☐ Quarterly ☐ Monthly

Start on 12 / 20 / 2013  
Month Day Year

End on: ☐ \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(check one) Month Day Year

☒ No end date, until cancelled

### Credit Card Information (to be completed by customer)

Card type ☒ MasterCard ☐ VISA ☐ Discover ☐ AMEX ☐ Other \_\_\_\_\_

Cardholder name Claude Simon Cardholder ZIP Code 10001  
(as shown on card) (from credit card billing address)

Card number 5491 139388543945 Expires 04 / 2015

☒ Notify me via email when my credit card is charged. (Make sure email address above is correct.)

Claude Simon 12-15-2013  
Customer's signature Date