



Payment & Service Authorization

Dear Customer,

Thank you for choosing Modern Cooperation for your service needs. Modern can automatically deduct from your credit card, the services that we provide and other balances due. Please complete the form below and return it to us.

Customer Name: _____

City, State & Zip Code: _____

Telephone Number: _____

Type of Card: Master Card/Visa

Customer Service Number on Credit Card _____

Credit Card Number _____

Expiration Date: _____

CV2 Indicator (last three digits on the back of the card on the signature line: _____

Name as it appears on the credit card: _____

Address of the cardholder: _____

I, the undersigned and authorized card holder, hereby authorize Modern Cooperation, to keep my credit card information on file and to automatically deduct from my credit card account, my monthly payment and other balances due, by processing a charge to my account as indicated above. This authorization is to remain in full force and effect until either the customer number/account written notification from me of its termination. A termination thus delivered will be effective the day after such delivery and all invoices billed to the customer number/account written above through the date of such delivery will be properly charged to the credit card number written above.

This agreement creates a legally binding contract, read carefully before signing.

Name (Please Print) _____

Signed: _____

Date: _____ Effective Date: _____

Modern Corporation, 4746 Model City Road, P.O. Box 209, Model City, NY 14107-0209
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