



11680 SOUTH HARRELLS FERRY, BATON ROUGE, LOUISIANA 70816 PH (225) 292-1212 FX (225) 292-9292

CUSTOMER NAME: _____ PHONE: _____

ADDRESS: _____

AUTOMATIC PAYMENT OPTION CHECKING/SAVINGS

What is Automatic Payment Option?

The automatic payment option is offered to Allied Systems, Inc. customers as a convenient way to submit payments through an automatic bank debit from a checking or savings account. Once you sign up for Automatic Payment, your bank account will be debited for the amount shown on your monthly, quarterly, semi-annual or annual recurring invoice. You can cancel at anytime within 30 calendar days notice.

What are the benefits to you?

- ❖ Saves you money – no more checks, no more postage
- ❖ Avoids lapses – payments are automatic, so no chance of late payments

How do we sign up?

- ❖ Complete and sign the form below
- ❖ Attach a voided check showing the bank routing number and account number
- ❖ If you have more than one account with Allied Systems, Inc. please list all accounts to be paid by Automatic Payment

How does it work?

- ❖ Each invoice will indicate "Paid by Auto Draft" at the top and show the amount of your automatic withdrawal
- ❖ Debits to your account will be made on the 16th of the month
- ❖ To cancel Automatic Payment, simply send a written notice to the payment address on your bill at least 30 calendar days prior to the date you want the withdrawal cancelled

This payment authorization shall not supersede any provisions of your Contract with Allied Systems, Inc. In the event of a conflict with any contract provisions, the contract controls. You shall be liable for any expenses incurred by Allied Systems, Inc. as a result of insufficient funds. If you need to change banking information or have other questions, please contact the billing department at 225-292-1212. **Please sign and remit this form with a voided check.**

Yes, I authorize Allied Systems, Inc. to initiate withdrawals from the checking account on the attached voided check. This authorization will remain in effect until I notify Allied Systems, Inc. in writing within 30 calendar days before my account is charged. I understand the terms and conditions of this form.

Authorized Signature and Date

Bank Name

Routing Number

Checking/Savings Account Number