

WAGNER & ZWERMAN LLP

Certified Public Accountants

Mark Wagner, CPA
Andrew M. Zwerman, CPA
Vincent J. Preto, CPA
John Antinore, CPA
Kelly J. Schmidt, CPA

201 Old Country Road, Ste 202
Melville, NY 11747
Phone: 631-777-1000 Fax: 631-777-1008
E-mail: staff@wzcpafirm.com

WAGNER & ZWERMAN LLP Auto Credit Card Authorization

Please complete and sign the form below. Based on your invoice we will automatically charge your account the amount of your invoice and the charges will appear on your monthly credit card statement. Any disputes for charges to your credit card must be presented in writing within seven days of processing. You may cancel automatic billing at any time by notifying us **in writing**.

All requested information is required, will be kept strictly confidential and will not be used for any purpose other than as explained above.

CREDIT CARD INFORMATION _____

Credit Card Type: ___ Amex ___ MasterCard ___ Visa ___ Discover

Card Number: _____ C.I.D. #: _____ (3 or 4 digit code)

Credit Card Expiration Date: _____

Cardholder's Name (as shown on credit card): _____
(Please Print)

Address on Cardholder's Statement: _____

City: _____ State: ___ Zip: _____ Phone: () _____

Cardholder's Signature: _____ Date: _____

PAYMENT AUTHORIZATION _____

I authorize Wagner & Zwerman LLP to automatically bill the card listed above on the _____ of every month:

Amount: \$ _____

Please return this form to Kathleen via fax @ (631) 777-1008,
e-mail @ kpagano@wzcpafirm.com or mail it to the address listed above.