



DRAGON JACKET INSULATION

ONE TIME ACH PAYMENT AUTHORIZATION

PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN

All information will remain confidential

Name on Account: _____

Billing Address: _____

Billing City: _____ Billing State: _____ Billing Zip: _____

Account Type: Checking Savings

Bank Name: _____

Bank Routing Number: _____

Bank Address: _____

Bank City: _____ Bank State: _____ Bank Zip: _____

Account Number: _____

Amount to Charge: \$ _____ (USD) On or After Date: _____

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only and does not provide authorization for any additional unrelated debits or credits to your account.

ACCOUNT HOLDER- PLEASE SIGN AND DATE

Signature: _____

Print Name: _____ Date: _____

I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted transaction date. In the case of the payment being rejected for Non-Sufficient Funds (NSF) I understand that The Dragon Group, LLC. may at its discretion attempt to process the charge again within 30 days, and I agree to an additional \$25.00 charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I will not dispute The Dragon Group, LLC.'s billing with my bank so long as the transaction corresponds to the terms indicated in this agreement.