P 1300 33 1000



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ABN 41 101 179 079

RECURRING CREDIT CARD PAYMENT AUTHORITY

By signing this document, I/We authorise Solutions Outsourced Pty Ltd with ABN 41 101 179 079, to debit my/our credit card, detailed in the Schedule below. I/we must pay you when due under the arrangement between us.

This authority is to remain in force until the Final Payment Date specified or further notice if no Final Payment Date is specified.

The Schedule
Customer Name:
Card Holder Name:
Credit Card Number: / / / /
Expiry Date: / CCV:
Fixed Amount: or or
Variable Maximum Amount: \$,
Frequency of Payments:
First Payment Date:/
NOTE: Subsequent payments will be taken from your nominated credit card on the 7th for your payment frequency, or on the next business day if this falls on a non-business day.
Final Payment Date:/
Payment Details:
Only persons authorised to operate credit card must sign here:
Signed:Date:
Signed: Date:

Payments will attract a credit card surcharge:

- 2% for Visa & Mastercard
- 3% for American Express





