



Electronic Payment Authorization for Electronic Funds Transfer (ACH/Bank Draft) and Recurring Credit/Debit Card Payment

Effective January 1, 2010, LiveAir Networks will require all monthly recurring accounts to pay service fees and applicable taxes via electronic payment. Failure for your account to utilize electronic payments will result in your account being billed an additional \$5 per month "non-electronic payment fee". We accept electronic payments via Electronic Funds Transfer (ACH) from a specified checking or savings account, or via a recurring credit or debit card payment from any major card network (Visa, MasterCard, Discover, and American Express).

For corporate and government customers that do not allow direct vendor ACH debits, but that do provide a direct deposit payment option, please contact our accounting department at accounting@liveair.net so that we may set this option or other electronic payment mechanism on your account.

Billing Account Name \_\_\_\_\_

LiveAir Contract Number(s) \_\_\_\_\_ (found on your invoices or by emailing accounting@liveair.net— 7 digit number beginning with 90...)

Action you wish to take:  New Request  Change to Existing Authorization  Cancel Existing Authorization

Authorization Scope:  Monthly Recurring Charges Only  All Charges Incurred on My Account
Invoices not related to contract services will continue to be billed and are due 15 days from invoice date. All invoices and charges to your account will be settled via this electronic payment account including incidental charges.

Electronic Funds Transfer (ACH/Bank Draft)

Account Holder's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Account Holder Address \_\_\_\_\_ Street City State Zip

Bank/FI Name \_\_\_\_\_ Bank/FI Phone Number \_\_\_\_\_

Bank/FI Address \_\_\_\_\_ Street City State Zip

ABA Routing Number (9 digits) \_\_\_\_\_ Account Type:  Checking  Savings

Bank/FI Account Number \_\_\_\_\_ Return this form with a voided check (checking account) or deposit slip (savings account).

Credit/Debit Card Payment (Visa, MasterCard, American Express, Discover)

Cardholder Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Cardholder Billing Address \_\_\_\_\_ Street City State Zip

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name as it appears on card \_\_\_\_\_ Card Type:  Visa  Mastercard

Card Security Code \_\_\_\_\_  AmEx  Discover

Visa, Mastercard, and Discover are 3 digit on the signature panel of your card, American Express is a 4 digit number printed on the front of your card after and to the right of your card number.

I/We authorize LiveAir Networks to charge the above credit/debit card or initiate a debit entry to my/our checking or savings account from the financial institution indicated above. I/We understand that in the event the original transaction is rejected due to insufficient funds, a \$25 service charge will be directly billed to me/us, in addition to the service rate due that month. LiveAir Networks may debit my account for amounts becoming due by me/us on a biweekly basis, according to the due date for invoices on my account. I authorize LiveAir Networks to bill me/us for any past due amounts should my/our credit card be declined or my/our transaction be rejected due to insufficient funds. This authorization is to remain in full force and effect until LiveAir Networks has received written notification from me (or either of us) of its termination in such time and manner as to afford LiveAir Networks and its financial institution a reasonable opportunity to act on it.

Signature \_\_\_\_\_ (date) \_\_\_\_\_

Signature (Joint and Corporate Accts) \_\_\_\_\_ Date \_\_\_\_\_

Submit completed form to 1231 FM 153 Unit A, Smithville, TX 78957; email scan to accounting@liveair.net, or fax to 866-396-8990.