



AUTHORIZATION FOR PAYMENT

Customers must provide payment information prior to scheduling service. Customer authorizes Pat Chem to initiate payment for services performed before results are provided. A 2% convenience fee applies for all credit card transactions. Customer understands Pat Chem may Pre Authorize the credit card or bank information in advance of payment process. Should any such debit(s) be charged backed, customer authorizes Pat Chem to collect a Returned Item Fee of \$25.00 per transaction. Financially sensitive information is not stored locally nor accessible by Pat Chem employees after the said transaction.

1. CREDIT CARD INFORMATION

Credit Card Type (circle one): MasterCard Visa American Express

Number: _____

Expiration Month: _____ Expiration Year: _____ Security Code: _____

Cardholder Signature X _____ Date ____ / ____ / ____

2. ACH PAYMENTS/DEBITS

Financial Institution Name: _____ Checking or Savings (circle one)

Routing Number: _____ Account Number: _____

Customers Signature: _____

3. Check/Money Order received in advance of results being reported