UMPQUA BROADBAND

FORMERLY DC WIRELESS ISP

Recurring Payment Authorization Form

If you would like to enjoy the convenience of automatic recurring billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information

Customer/company _____

Contact name _____ Account number _____

Email address _____ Phone ( ) - Ext: _____

Payment Information

I authorize Umpqua Broadband to automatically bill the card listed below as specified:

Product/service description _____

Recurring amount _____

Frequency (check one) ☐ Once ☐ Daily ☐ Weekly ☐ Twice/month ☑ Monthly ☐ Quarterly

Start on (Check one) ☐ 1st of the month ☐ 15th of the month

End on: (check one) ☐ ____/____/____ (Month / Day / Year)

☑ No end date

Credit Card Information

Card type ☐ MasterCard ☐ VISA ☐ Discover

Cardholder name (as shown on card) _____ Cardholder ZIP Code (from credit card billing address) _____

Card number _____ Expires ____/____

_____ _____

Customer's signature Date

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