



**Nolan Interactive, Ltd.**

**Automatic Credit Card Billing Authorization Form**

For your convenience, Nolan Interactive accepts MasterCard and Visa payments online. In addition, we also offer monthly, quarterly, semi-annual and annual automatic billing. Automatic billing is a simple and convenient way to pay your bill.

Attached you will find our automatic credit card billing authorization form. In order to automatically bill your credit card each month, we require your written authorization.

Please print this form, complete it and fax it back to the attention of Jeff Nolan at **(312) 924-9490**.



**NOLAN INTERACTIVE, LTD.**

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**Nolan Interactive, Ltd.****Automatic Credit Card Billing Authorization Form**

If you would like to enjoy the convenience of automatic 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** (To be completed by merchant)

Customer name: \_\_\_\_\_

Customer account number: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Payment Information** (To be completed by merchant)

I authorize Nolan Interactive, Ltd. to automatically bill the card listed below as specified:

Amount: \$ \_\_\_\_\_

Frequency:  Weekly  Bi-Weekly  Semi-Monthly  Monthly Quarterly  Semi-Annually  Annually (Check only one)

Start billing on: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

End billing when:  Contract expires: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Customer provides written cancellation**Credit Card Information** (To be completed by customer)

Nolan Interactive, Ltd. accepts the following credit cards: **Visa, MasterCard, Discover**

Credit card type: \_\_\_\_\_

Credit card number: \_\_\_\_\_

Expires: \_\_\_\_ / \_\_\_\_

Cardholder's name: \_\_\_\_\_

Cardholder's Zip code (required): \_\_\_\_\_

(as shown on credit card)

(from credit card billing address)

Customer's signature: \_\_\_\_\_

Date: \_\_\_\_\_