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Accu	l race [®]





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AccuZIP6 Account # Total Unique Serial Numbers Issued

Sales Representative

Authorization Date:

Signed:	lease complete URL (Example: https://mycompany	v.iaccutrace.com)
	https://	.iaccutrace.com
, , ,	issued to our account. This number is reflected in the "Total Unique Se e of the issued Low or High range, I agree to purchase an additional Lic	
If you have any questions on billing or credit card charges please con Tel: 800-233-0555. Fax: 877-839-6531.	tact: AccuZIP, Inc. 3216 El Camino Real, Atascadero, CA 93422-2500.	
AccuZIP, Inc. receives a new form requesting an update or cancellation	n and check "Cancel Authorization" and fax back to the number provided below. This aut on, and AccuZIP, Inc. has sufficient time to clear any arrears and act on the authorization. is responsible for informing Company of any changes in the above information. Account term and the accountholder account remains good standing.	Cardholder will continue to be liable
The accountholder/cardholder should ensure such charge will not ca \$25.00 penalty for any rejected charge pursuant to this authorization Cardholder further authorizes Company to initiate a charge or credit or prior authorization(s). Company and cardholder further acknowle	rvices rendered. Company will charge the above credit card for the amount specified in a use the credit card account to exceed any established credit limits or available balances and Cardholder acknowledges that they will continue to be liable for any such rejected or use necessary to correct any prior overpayment or underpayment of any invoice or any ot dge that if this payment authorization is for a recurring charge, then Company will inform invoice sent to accountholder/cardholder after the charge date. Recurring charges will be a considered and the charge date.	is on the date of charge. There will be a inpaid charges including all penalties. her charge or credit effected under this in cardholder of any variances in the
	s and agrees that AccuZIP, Inc. (hereafter "Company") is authorized as of the authorizatio lebit card or other payment card (each referred to herein as "credit card"), specified aboved.	
2-Years for additional 10% Discount	3-Years for additional 20% Discount	
	795 (Mailing Services) (20% Discount)	unt) Cancel Authorization
One (1) Year term with guaranteed "sam	e price" on annual renewal	
	9/monthly (Mailing Services)	\$
Monthly Recurring Payment		One-Time Auth
Check All Applicable:		
Phone Number		
Billing City, State, ZIP		
Billing Address	Credit Card Number:	Expiration: Sec#:
Company Name (hereafter "Accounthold	er") AMX VISA MC Type of Card:	Discover
Name of person authorizing payment	Name on the Card:	
Payer Information (Please PRINT)	Credit Card Account Informat	ion (Please PRINT)

Username (This is case sensitive and can be changed later)