



DRAFT AUTHORIZATION FORM

Applicant _____, authorizes First Citizens Bank AND/OR Authorize.Net through Gill Security Systems, Inc. to debit the recurring fee in the amount of \$_____ from the account listed below. Applicant agrees that this fee is non-refundable. Drafts are conducted between the 1st and 5th of each month. It is the responsibility of the subscriber to have funds available at the time of the draft. It is understood that if funds are not available for the draft and it is returned, there will be an additional \$25.00 return check fee, (along with monthly amount) on subscribers who have their checking account on file. This does not apply to drafts from credit/debit cards.

Please complete one type of account draft, checking OR credit/debit card.

Account Holders Name _____

CHECKING (Please attach voided check)

Routing # _____ Account # _____

EMAIL ADDRESS _____

CREDIT/DEBIT CARDS

Accepted Credit Cards _____ Visa _____ MasterCard _____ Discover

Account # _____ Expires _____

Authorized Signature _____ Date _____

Please attach voided check here