

Salem Internet Inc.

4113 Robin Rd
Salem, IL 62881
618.315.5350

Automatic Transfer Authorization

I, _____, authorize Salem Internet, Inc. and financial institution named below to pay my monthly service fee on an established monthly date. This authority shall remain in effect until cancelled in writing by Salem Internet, Inc. or myself. I understand that payments may be honored only if sufficient funds are available in my account, and that a service fee will be charged on any insufficient fund transaction. A voided check is attached with my bank information.

Bank Information:

Bank Name: _____

Bank Address: _____

Bank City/State/Zip Code: _____

Bank Phone Number: _____

Bank Account Number: _____

Bank Routing Number: _____

Authorized Signature: _____

Date: _____

Effective Date: _____

Billing Information:

Subscriber Name: _____

Subscriber Address: _____

Subscriber City/State/Zip Code: _____

Subscriber Phone Number: _____