



CREDIT CARD Payment Authorization Form

Schedule a one-time or recurring payment to be automatically deducted using your debit or credit card. Just complete and sign this form to get started!

Here's How CREDIT CARD Payments Work:

You authorize a one-time or regularly scheduled charge to your debit or credit card. You will be charged the amount shown below on the date or schedule indicated. A receipt for Credit/Debit Card payment will be emailed to you and the charge will appear on your bank or credit card statement as a "Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I _____ authorize **Knight Financial LLC** to charge my card account
(full name)

indicated below for the following one-time or scheduled amount for payment of my **automobile**:

Amount: _____

One Time Payment

Recurring Payment Schedule

One Time Payment Date: _____

Start Date: _____

End Date: _____

Frequency: _____

Card Information

Debit Credit

Name on Card: _____

Card Number: _____

Expiration Date: _____

Billing Zip Code: _____

Billing Address

Billing Address: _____

City: _____

State: _____

Zip Code: _____

Phone#: _____

Email: _____

SIGNATURE _____

DATE _____

For a One Time Payment this authorization is for a single transaction on or after the indicated date. For a Recurring Payment Schedule, I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify **Knight Financial LLC** in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of a CREDIT CARD Transaction being rejected for Non Sufficient Funds (NSF) I understand that **Knight Financial LLC** may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25 charge for Credit/Debit Card attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this recurring billing with my bank so long as the transactions correspond to the terms indicated in this authorization form.