



Credit Card Authorization Form

Date: ____/____/____

I _____ authorize Insynq, Inc. to charge my credit/debit card listed below, starting on the date services are first requested and on the 1st day of the month for each following through to termination of services for the amount of monthly services, as adjusted from time to time, due to addition of services rendered or deletion of services rendered.

Services rendered may include some or all of the following service options:

- | | |
|------------------------|---|
| Virtual Desktop(s) | Third Party Application(s) Integration |
| Application(s) Hosting | Third Party Hosting/Licensing Fees and Surcharges |
| Data Storage | Setup and Modification Fees |
| Custom Services | Data Returns - Service, Shipping & Storage Device |
| Offsite Backup(s) | Application Testing Fees |
| Software Sales | Tax Where Applicable |
| Consulting Fees | Other New Services Added From Time to Time |

Credit Card Information:

Name as it appears on the Card: _____

- As the Individual card holder, I hereby authorize this card to be used for the deposit required.
- As the company representative, I hereby authorize this card to be used for the deposit required.

Card Type: VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Credit Card Number: _____ - _____ - _____ - _____ Expiration Date: ____/____

Security (CVV) Code (Visa & MC = 3 digits, Amex = 4 digits): _____

Credit/Debit Card Billing Address: Street: _____

City: _____ State: ____ Zip Code: _____

I _____ hereby authorize this card to be charged for service and/or final payment, until Insynq, Inc. has been notified of cancellation by sending written notice by email or fax.

Cardholder/Company Rep. Name Printed

Company Name

Signature

Date

Billing Email Address

Billing Phone #

This Authorization can be faxed to 888-774-7507 or Emailed to billing@insynq.com
Payment and orders cannot be placed until the completed form is received.