

This Recurring Credit Card Charge Authorization is made a part of all existing *FlexDraft* license agreements, and all existing credit card charge authorizations, if any.

Please correct and/or update all existing information and please provide all missing information. *All fields are required.*

Customer/Attorney:

Name:

TX Bar #:

Firm Name:

Street:

City:

State:

Zip:

Phone:

Fax:

Email:

Credit Card:

VISA

Exact name on card:

MasterCard

Billing Address: Street:

AMEX

Zip:

Discover

Card#:

expiration date:

Authorization for Automatic Monthly Charges:

By signing below:

I authorize *FlexDraft*, L.L.C. to [continue to] charge _____ per month to the above credit card for payment of *FlexDraft* licencing fees and service charges due from the above Customer/Attorney, beginning immediately and continuing monthly until all payments due under the existing *FlexDraft* license agreements have been made. All existing agreements regarding increases, renewals, cancellations and other matters remain in effect. For example, the undersigned may cancel the Continued Monthly Payments at any time by written or email notice to *FlexDraft* at least 1 month before the date of the first cancelled charge.

I promise to keep the above credit card active and to notify *FlexDraft* and provide a substitute card immediately if the above card ever ceases to be active.

date signed

Cardholder signature

Return the completed, signed Form:

by email to:
sales@flexdraft.com

by fax to:
FlexDraft, L.L.C.
832.201.9219

by U.S. mail to:
FlexDraft, L.L.C.
3555 Timmons, Ste 1020
Houston, TX 77027