Solari

PO Box 157
Hickory Valley, TN 38042
731.403.6263

Payment Authorization Form

Schedule your payment to be automatically deducted from your bank account, just complete this form, sign and take to your bank.

Here's How Payments Work:

You authorize a one time or recurring charge to your checking/savings account. You will be charged the amount indicated below. The payment will appear on your bank statement as an "ACH Debit"

Payment made to:

Bank: The National Bank of Malvern
Routing Number: 031912332
Account Number: 4177878
Name on the Account: Solari, Inc.
Bank Address: 2 West King Street,
PO Box 38
Malvern, PA 19355
Solari Contact Information: Nita Lax - 731.403.6263

Beneficiary Name: Solari, Inc.
Beneficiary Acct #: 4177878

You agree that a notification will be provided, in the event you decide to cancel this agreement at least 15 days prior to the payment collection date.

Please complete the information below:

I _____ authorize my bank to debit my checking/ savings account indicated below for _____(amount) on the _____ (day) of each _____ for payment of my Solari Report subscription.

1 month digital only - $30 ___Recurring each month
6 month digital only - $160 ___ One time Payment ____ Recurring Payment
1 year digital only - $275 ___ One time Payment ____ Recurring Payment
1 year digital plus print subscription - $375 ___ One time Payment ____ Recurring Payment

Checking or Savings

Name on Acct _____

Bank Name _____

Account Number _____

Bank Routing # _____

Bank City/State/Zip _____

Signature_____ Date_____