

CHECKING ACCOUNT (ACH) AUTO-DEBIT AUTHORIZATION



By Your signing below, You hereby authorize SPOT Business Systems, LLC, a Utah limited liability company (“SBS”) to automatically withdraw each month from Your below described account (“ACH”) the fees for Your selected SBS Plan(s), currently \$_____ per month with appropriate future adjustment for changes in the number of workstations and other changes plus an automatic withdrawal for telephonic notification service overage, if any. Said withdrawal is to be made on or about the first (1st) business day of each month and the extra telephonic overage withdrawal at the end of each applicable month. No further or additional action or consent is required by You before SBS may take such actions, including, but not limited to, informing You in advance of such withdrawal. You also hereby authorize SBS to debit from said ACH account any amount owed by You to SBS that will not be paid by the said monthly ACH withdrawals, including overdue or unpaid amounts owed upon termination of SBS’s services or that are more than 45 days past due. Each of the above ACH authorizations is being relied upon by SBS in providing low cost services to You and hence You may not revoke them without the prior written consent of SBS. You promise to take such further and additional action as SBS may from time to time determine to be required to permit the ACH withdrawal. SBS will send a copy of Your paid invoice for each monthly billing to Your Email Address listed below. You are responsible to notify SBS if Your email address changes.

SBS is not responsible for bank account charges, insufficient funds fee, other bank fees, or overdrafts caused by said ACH withdrawals. In the event an ACH withdrawal is denied, You shall immediately pay to SBS such denied amount plus all late payment fees and collection costs permitted under the law. If You fail to immediately make such payment, Your use of the Plan(s) and Customer Care services will be automatically terminated. This ACH authorization will remain in effect until You give SBS an effective written notice of termination of the SBS Plan(s). Written termination of the Plan(s) will also terminate Your right to use SPOT as well as Your Customer Care services.

BUSINESS INFORMATION	_____	_____
	<i>(Owners Name - You)</i>	<i>(Business Address)</i>
	_____	_____
	<i>(Company Name)</i>	<i>(City)</i>
	_____	_____
	<i>(DBA)</i>	<i>(State)</i> <i>(Zip)</i>
_____	_____	
<i>(Daytime Phone)</i>	<i>(Fax)</i>	
_____	_____	
<i>(Cell Phone)</i>	<i>(Email Address)</i>	

PLAN	<input type="checkbox"/> <i>SPOT Hosting</i>	<input type="checkbox"/> <i>SPOT Subscription</i>	<input type="checkbox"/> <i>SPOT Telephony</i>	<input type="checkbox"/> <i>WebSite</i>	<input type="checkbox"/> <i>RouteTrac</i>	<input type="checkbox"/> <i>Customer Care</i>
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ACCOUNT	<input type="checkbox"/> <i>Checking</i>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>Transit Routing Number</i>
	<input type="checkbox"/> <i>Savings</i>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>Account Number Information</i>

SIGNATURE	_____
	<i>(Company Name if applicable)</i>

<i>(Authorized Signature - You)</i>	

<i>(Date)</i>	

PLEASE NOTE:

In order for your service to be activated, a copy of a “voided” check for the above bank account **MUST** be attached AND returned with this document by US mail or Fax to:

SPOT Business Systems, LLC
 12345 South 300 East
 Draper, Utah 84020
 801-495-1200
801-495-1208 (fax)