



Credit Card Authorization

To: Clarity Technologies Group, LLC

Regarding: Credit Card Authorization

Department: Accounts Receivable

I hereby authorize the Payment Gateway, on behalf of Clarity Technologies Group, LLC (Clarity), to initiate charges to the bank accounts or credit cards that I enter, or enable Clarity to enter, by electronic method in order to pay amounts that are owed to Clarity in accordance with the instructions provided by Clarity electronically and, if necessary, to initiate adjustments for any transactions credited or debited in error.

I represent that I have authority to bind the organization that owns the credit card or bank accounts, and to authorize all transactions to the bank accounts that are initiated through the Clarity Payment Gateway.

I acknowledge that transactions initiated to the bank accounts must comply with the provisions of U.S. law. This authorization will remain in effect until the organization notifies Clarity in writing to cancel it in such time as to afford Clarity and the Payment Gateway reasonable opportunity to act on it.

Credit Card Type: Visa ___ MasterCard ___ AMEX ___ Discover ___ Exp. Date: _____

Card Number: _____ Security Code: _____

Name on Card: _____ Street Address: _____

City: _____ State: _____ Zip Code: _____

Company Name

Authorized Signature

Date: _____

Date Received at Clarity Technologies Group, LLC: _____

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