



Thank you for requesting Auto Pay. Each month on or after your due date, your credit card account which you have chosen will be debited. Should your due date fall on a weekend or banking holiday, your account will be debited on the next business day.

Please fill out the form on the next page and mail, fax or scan back to our office.

**Mailing address:**

Summit Digital  
PO Box 465  
Portland, MI 48875

**Fax number:**

231-908-0039

**Email Address:**

[pcoleman@summitdigital.us](mailto:pcoleman@summitdigital.us)

If at any time you would like to discontinue Auto Pay, please notify our office in writing five days prior to your due date to cancel this service.

Thank you,

Summit Digital  
Billing Department

Summit Digital  
PO Box 465  
Portland, MI 48875  
888-600-5040



CONSUMER AUTHORIZATION FOR AUTOMATED CREDIT CARD DEBIT ENTRIES  
AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS

COMPANY NAME: Summit Digital/WBOK

I (we) hereby authorize Summit Digital, hereinafter called COMPANY, to initiate debit entries to my (our) CREDIT CARD indicated below to debit monthly Cable TV bill and/ or Internet Services.

MASTER CARD OR VISA (please circle)

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

3-DIGIT SECURITY CODE ON BACK OF CARD: \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY has received written notification (within 5 days of debit) from me (or either of us) of its termination in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it.

NAME (S) & ACCOUNT NUMBER

\_\_\_\_\_  
\_\_\_\_\_

MAILING ADDRESS (where you receive your credit card statement):

\_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_

Please send NO notification. My credit card statement is all I need. \_\_\_\_\_

Please email notification. My email address is: \_\_\_\_\_

\_\_\_\_\_ I prefer to have my payment deducted on the 15<sup>th</sup> before billing and receive no further paper billings.

\_\_\_\_\_ I prefer to have my payment deducted on the due date and continue to receive paper billings.

