



3484 Irwin Simpson Rd. • Mason, OH 45040
phone 877.353.4363 • fax 866.902.8959 • www.LegendWebWorks.com

E-Check Authorization Form

I authorize Legend Web Works, LLC to automatically draft my checking account at the financial institution named below for service plan payments including:

- My initial service set-up fee of: \$ _____
- Service fees of: \$ _____ plus tax due: ____ Monthly ____ Quarterly ____ Semi-Annually ____ Annually
- Billable work performed by Legend Web Works, LLC.

I understand I must contact Legend Web Works LLC in writing to cancel this authorization at least 5 business days before the scheduled withdrawal.

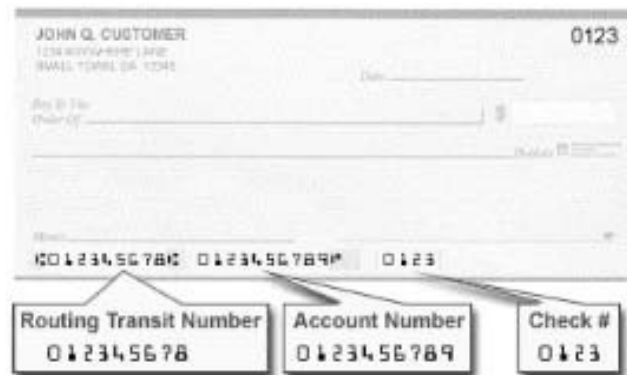
I will notify Legend Web Works LLC in writing if I change banks or if my account number or routing number changes.

I understand that Legend Web Works LLC will impose a penalty if a bill is not paid by our financial institution, in the same manner as a check returned for insufficient funds.

Bank Name: _____

Routing Number: _____

Account Number: _____



Company Name: _____

Account Holder's Name: _____
Print account holder's name here

Account Holder Signature: _____ Date: ____/____/____
Please sign and date here

Please fax this signed form to Legend Web Works, LLC at 866.902.8959.