

**Corporate Address:**

Communiqué Kaleidoscope, Inc.  
7349 N. Via Paseo del Sur, Suite 515-77  
Scottsdale, AZ 85258

**Billing Address:**

Communiqué Kaleidoscope, Inc.  
Payment Processing  
7349 N. Via Paseo del Sur, Suite 515-77  
Scottsdale, AZ 85258

**Bank Draft One-time Use Authorization Form**

Please use this form to authorize Communiqué Kaleidoscope, Inc. to issue a bank draft from your checking account only once for the amount currently due.

Account Domain Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Other Domain Names: \_\_\_\_\_ Specify Services for Domain Names:  
\_\_\_\_\_ Web Hosting Account   
\_\_\_\_\_ Registration/Transfer/Renewal


**Account Information**

For bank accounts in the United States only.

**Customer Information**

\_\_\_\_\_  
Customer Name on bank account  
\_\_\_\_\_  
Address on check  
\_\_\_\_\_  
Address Line 2  
\_\_\_\_\_  
City State Zip  
\_\_\_\_\_  
Telephone Number  
\_\_\_\_\_  
E-mail Address

**Checking Account Information**

\_\_\_\_\_  
Bank Name  
\_\_\_\_\_  
Bank City and State  
\_\_\_\_\_  
Bank Phone Number  
**Enter the information that appears on your check in the spaces below the example (U.S. checks only!)**  
Routing # (9 digits) Account # Check #  
  
TRANSIT SYMBOL ON US SYMBOL

**This form must be FAXED back to +1 480-998-1943  
Or you can mail it to our Billing Address at the top right of this form. For questions, please contact our Billing Department at +1 480-998-1843 or by email: [billing@commkal.com](mailto:billing@commkal.com)**

\_\_\_\_\_  
Bank Routing or "Transit" Number  
\_\_\_\_\_  
Bank Account Number  
\_\_\_\_\_  
Account Type (Checking or Savings)

**Authorization**

By sending in this bank draft authorization form, you authorize Communiqué Kaleidoscope, Inc. to draft your bank account for services provided and applicable excess usage fees. You understand that this is a one-time bank draft authorization. You are *not* authorizing Communiqué Kaleidoscope, Inc. to set up your account for recurring billing – rather, you will make other payment arrangements prior to your next payment due date.

You understand that all account cancellations must be made in writing according to the requirements of the Communiqué Kaleidoscope, Inc. Terms of Service Agreement, which you agreed to when you signed up for your web hosting account. You agree that any credits issued by Communiqué Kaleidoscope, Inc. under their service uptime guarantee will *not* be refunded to your bank account, but rather the amount of the service credit will be applied to your next billing cycle.

You acknowledge that you are the owner or authorized signer on the account information entered in this form. This draft will be processed through your local bank as a normal check; your account will never be accessed electronically. You will receive our bank draft from your bank in your normal monthly check history.

\_\_\_\_\_  
Signature of authorized Checking Account Holder

\_\_\_\_\_  
Date