AUTOMATIC PAYMENT ENROLLMENT FORM

Terms and Conditions

Your credit card or check (ACH) payment will be processed on the day your invoice is generated or the next business day immediately following. The payment will be for the full balance of all outstanding invoices on the account.

Should you wish to cancel automatic payment, you may do so at any time in writing via fax, email, or postal service. Cancellation notice must be received by the last business day the month in order to ensure that automatic payment information is cancelled before the next billing date.

Payment Information

Customer Name _____

Billing Address _____

City/State/ZIP _____

Email address for receipt _____

Please charge my ☐ Credit Card ☐ Checking account

CREDIT CARD INFORMATION

☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Credit Card number _____

Expiration Date _____ / _____ CVV Code _____

Name on Card _____

Effective 4/1/2026, a 3% surcharge will be applied to all credit card transactions.

CHECKING ACCOUNT INFORMATION

☐ Checking ☐ Savings ☐ Business Checking

Bank Name _____

Bank ABA Routing Number _____

Bank Account Number _____

Name on Account _____

There will be a $35.00 service fee for any check that is returned by your financial institution. More than one returned check in a twelve-month period will result in automatic discontinuation of automatic payment.

Please attach copy of voided check

I hereby authorize River Mill Data Management to charge my account in accordance with the Terms & Conditions above. Please begin processing my payments automatically as of the date below. I further acknowledge that this payment authorization will remain in effect unless I notify River Mill Data Management of its cancellation via fax or the email listed at the bottom of this page.

_____ _____

Signature Date

_____

Print Name

Please fax completed form to (706) 317-5086 or email to billing@rivermill.net