

If you don't want to pay online, you can also fill in the credit card form below:

Contact Information				
Customer or company name:				
Address:				
City, state, zip code, country:				
E-mail (required*):				
CameraFTP username:				
Billing Information	(Must match information on your credit card statement)			
Cardholder's name:				
Credit card type:	Visa: MasterCard:	American Express:	Discover:	
Card number:		Card Code (3-4 digit	s):	
Expiration date:	/(M/	M/YYYY)		
Billing address:				
City, state, zip code, country:				
Telephone Number (required*):				
* Email and telephone number are required for contacting you about billing.				
Authorized Signature:		Date:		

Automatic Payment Option

CameraFTP supports automatic debiting. If you want to arrange for automatic payment, you can:

- A. Use your bank's Bill Pay service to schedule automatic payments; each payment must be over \$19. Be sure to include a note with your username or registered email address.
- B. CameraFTP can automatically debit your credit card with your authorization below:
 - I understand that all subscription plans, whether monthly or yearly, renew automatically.
 - I agree to notify CameraFTP if my billing information changes.

- I understand that I can cancel my subscriptions online at any time. I understand that if I change my subscription plans, the amount debited automatically shall be adjusted based on the new subscription price.

I have read t	he inform	ation above	and auth	orize Drive	e Head	quarters	s, Inc. (C	Camera	aFTP) to
automaticall	y debit my	y credit card	d as need	ed in orde	r to pay	y for my	subscri /	ption p	olans.

Authorized Signature:	 Date: