

**INVOICE PAYMENT AND SINGLE USE ACH AUTHORIZATION
RETURN WITH EQUIPMENT ORDER FORM TO CYPRESS ADVANTAGE
VIA FAX AT 866-815-3718 or by e-mail to Data@cypressadvantage.com**

Direct questions to: Cypress Advantage, 4013 N. Argonne Road, Spokane, WA 99212, or call 1-800-723-3163

AFFILIATE NAME: _____ **PO #:** _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE #: _____ **E-MAIL:** _____

The Affiliate identified above, by his/her signature below, hereby authorizes Cypress Advantage ("Cypress"), and such financial institution as Cypress, may in its sole discretion select, to initiate and/or transmit one (1) automatic clearing house (ACH) debit entry to the Affiliate's account identified herein below. The parties agree and understand that this ACH authorization is for a single debit entry only (a credit entry shall only be authorized for a single reversal related to this transaction). Affiliate acknowledges that the purpose of this ACH release is for the payment to Cypress for the one-time provision of goods or services as identified by Affiliate's most recent order form and that this constitutes a valid business relationship between the two parties. The Affiliate agrees to indemnify and hold Cypress' financial institution harmless from any and all claims associated with compliance with the aforementioned single use ACH authority. Affiliate agrees to provide a voided check to properly validate Affiliate's account and routing numbers.

Signature: _____ **Date:** _____

Bank Name: _____ **Phone #:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Bank Routing #: _____ **Account #:** _____

Requested ACH Date: _____ **Authorized ACH Dollar Amount:** _____

If the date or amount is not completed above: The price will default to that shown on Affiliate's most recent order form and/or the ACH will occur on the next available business day.

ATTACH VOIDED CHECK HERE

**Order cannot be processed
Without check being attached.**