

TIFFANY & TIFFANY, P.L.L.C.

Attorneys and Counselors at Law

Matthew W. Tiffany

770 Independence Circle
Virginia Beach, Virginia 23455

Telephone (757) 497-1449
Facsimile (757) 497-1867

W. Wayne Tiffany (1940-2005)

Dear Sir/Madam:

Thank you for your interest in a Recurring Automatic Payment Authorization and Terms and Conditions form which you can use to have your payment taken out via Credit Card or Debit Card. PLEASE SELECT **ONLY** 1 of the available options. Kindly review and fill out as applicable, sign, and return to this office as soon as possible. You can return this form by Faxing same to 757-497-1867, by regular mail to the address above, or you can also deliver your form in person to our address above. Should you have any questions regarding this form or the process, please email the office at nol@wvtiffany.com or call to discuss. When emailing, please DO NOT send any sensitive information such as credit or debit card information. Thank you.

This letter and all others from this office are an attempt to collect a debt and any information obtained shall be used for that purpose. This office is a debt collector.

Very truly yours,
Payment Plan Department

Recurring Automatic Payment Authorization and Terms and Conditions

These terms and conditions cover the pre-authorized payment (“Auto Draft”) from your designated account. The Auto Draft will be recurring in nature, subject to client approval, drafted on a pre-determined periodic basis, for a specified amount indicated on the attached form, until the account is paid in full or terminated for reasons set forth below, whichever comes first.

This Auto Draft service is provided as a courtesy. Please review your financial institution’s Electronic Funds Transfer Policy (“EFT Policy”) for more information, including information concerning your liability for unauthorized Electronic Funds Transfers (“EFT”).

You have the right to terminate the Auto Draft at any time. If you choose to terminate the Auto Draft you must notify our office immediately. If you notify our office verbally, you will need to follow up in writing within 5 business days. Please refer to your institutions EFT Policy for additional information on cancelling your EFT. The undersigned is responsible for any charge-back losses caused by failing to maintain sufficient funds in your account as well as losses caused by any mistake made by your banking institution. The undersigned agrees to hold Tiffany & Tiffany, P.L.L.C. (Tiffany & Tiffany) harmless for any loss, damage, or legal liability related to the Auto Draft. Tiffany & Tiffany reserves the right to cancel the recurring Auto Draft with or without notice, for reasons including but not limited to, insufficient funds and stop payment dishonors received by your financial institution.

Tiffany & Tiffany does not maintain, store, or manage your bank/card account information. It does not save or possess said data which is provided to it. Tiffany & Tiffany only provides the information needed by the card service company for the purpose of securing payment. You must contact us immediately if there is a change in your debit or credit card account that may affect payment processing.

Tiffany & Tiffany will not be able to process your payment until a signed copy of the Auto Draft Form is received. If you are not able to return the form in sufficient time for us to process your first payment, you should call to make your payment over the phone or deliver your payment to our office via other means (such as check, money order or cash if paid in person).

By signing below, you acknowledge receipt of a copy of these terms and conditions and the accompanying Recurring Automatic Payment Form. You agree to the above terms and conditions and authorize Tiffany & Tiffany to process the Auto Draft from the Credit Card or Debit Card you provide to our office. **Please contact our office with your card number within 7 from the date you send this completed form in order for us to process your payment.**

_____ Sign Here
Responsible Party

Please Print the Name as it Appears on the Card

Signature of Cardholder if different then the Responsible Party

Federal Law may require the following disclosure: **This is an attempt to collect a debt. This is a communication from a debt collector. Any information obtained shall be used for the purpose of collecting a debt.**

CREDITOR'S NAME: _____

RESPONSIBLE PARTY: _____

RECURRING PAYMENT DETAILS:

Payment Amount: \$ _____

Payment Frequency: EVERY _____

Anticipated Payment Commencement Date: _____

ACCOUNT INFORMATION:

Tiffany & Tiffany Account No.: _____

PLEASE SELECT ONE OF THE FOLLOWING PAYMENT METHODS:

TYPE OF CARD: DEBIT: _____ CREDIT: _____

ISSUING BANK: _____

CIRCLE CARD LABEL: VISA MASTERCARD AMERICAN EXPRESS DISCOVER

LAST FOUR NUMBERS ON THE CARD: _____ EXPIRATION DATE: _____

PLEASE PROVIDE THE FOLLOWING INFORMATION:

CONFIRM EMAIL ADDRESS: _____

CONFIRM PHONE NUMBER: _____

ADDRESS OF RECORD FOR CARD: _____

NAME OF CARDHOLDER: _____

PLEASE MAKE SURE THE NAME HERE IS **EXACTLY** AS IT IS ON YOUR CARD

SIGNATURE OF CARDHOLDER: _____

I AGREE TO THE ABOVE TERMS AND ACKNOWLEDGE TIFFANY & TIFFANY P.L.L.C. IS AUTHORIZED TO APPLY THE RECURRING PAYMENT TO THE CARD INFORMATION SUBMITTED IN ACCORDANCE WITH THE TERMS AND CONDITIONS SET FORTH ABOVE.

SIGNATURE: _____

DATE: _____

Federal Law may require the following disclosure: THIS IS AN ATTEMPT TO COLLECT A DEBT. THIS IS A COMMUNICATION FROM A DEBT COLLECTOR. ANY INFORMATION OBTAINED SHALL BE USED FOR THE PURPOSE OF COLLECTING A DEBT.