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AUTOMATIC CHARGE PROCESSING AUTHORIZATION

In our efforts to provide the best customer service to our clients, LaDouce Dental Lab is extending an additional and convenient payment option to you.

We will simply process and apply payment of your choice to your statement balance each month. It is one less check to write, call to make, and stamp to buy. It also ensures that your account will avoid interest charges and late fees. If you would like to take advantage of this offer, simply fill out the form below and return it to the lab via fax or mail. Please note that we will continue to send a monthly statement that will reflect and activity - this will be for your records only and no remittance will be necessary. If you need additional information, please feel free to call us at 989-799-0472.

Please charge my monthly statement balance to my credit card as follows:

MasterCard Visa American Express

Credit Card # _____ **Exp. Date** _____

Auth Code (3/4 digit code on back of card) _____

CC Billing Address _____

Doctor _____

Office Address _____

Signature _____ **Date** _____