



Da Vinci EZ-Pay Recurring ACH Debits **Terms and Conditions**

This is permission for recurring debits. As an authorized signer on the Depository Account presented, by completing and signing this form I give permission to Da Vinci Foods to automatically charge/debit the account specified in this form on the due date according to your billing terms that have been previously set in place. This authorization is to remain in full force and effect until has received written notification of its termination.

I acknowledge that a minimum Non-Sufficient Funds (NSF) fee of \$25 may be charged to me in the event there are insufficient funds available at the time the ACH payment is submitted.

I authorize Da Vinci Foods to charge/debit the account indicated in this authorization form according to the terms outlined above.

I understand that typing my name on this form is the equivalent of a physical and legally binding signature.