

The Foreclosure Marketing Machine

CREDIT CARD AUTHORIZATION FORM

How did you hear about us? _____

I, _____ hereby authorize SaveMeFromForeclosure.com, LLC to charge the amount of **US \$797.00** for my initial set-up fee to get started with their exclusive Foreclosure Marketing Machine.

I would like to be billed:

- _____ 1 Payment of \$797.00
_____ 2 EASY Payments of \$449.00

I also authorize SaveMeFromForeclosure.com, LLC to charge the recurring monthly service fee to this card for the following exclusive counties of my choice and **subject to availability** on a monthly recurring basis:

(Note: to find your monthly recurring fee please visit: http://www.goldbar.net/rei/sc/view_products.php?m=10039 and select your State from the drop down menu on the top left side of the page and it will show you the price of the county(s) you are interested in)

County, STATE

Monthly Recurring Fee

County, STATE

Monthly Recurring Fee

County, STATE

Monthly Recurring Fee

TOTAL MONTHLY RECURRING SERVICE FEE: _____

I understand that I will be charged either the initial set-up fee (\$797) or first month's payment plan fee (\$449) AND my first month's TOTAL monthly recurring service fee upon signing this agreement.

I understand that if I chose the 2 Payment Option that I will be charged another \$449 exactly 30 days from signing this form.

And I understand that I will be charged every month for my county(s) until I notify SaveMeFromForeclosure.com, LLC of my desire to discontinue

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services. I must provide a 30 day notice and complete and fax back a Cancellation Form.

SaveMeFromForeclosure.com, LLC is also authorized to charge this card in the future for any additional services, or service upgrades (including but not limited to additional county subscriptions), that I personally request in writing on my account.

Credit Card Information and Billing Address:

Credit Card #: _____ Expiration date: ____/____/____

Card Verification #: _____ (Visa/MC/Discover: 3 digit number found on the back of your card in the upper right hand side of the signature box; American Express: 4 digit number on the front of your card)

Card Holder: _____

Email: _____
(Where you want to receive billing and program information)

Phone: _____ Cell: _____ Fax: _____

BILLING Address: _____

City _____ State _____ Zip/Postal Code _____

(Where you receive your credit card statement)

I understand that this information will be used for purposes of verification with the credit card issuer and processors to prevent fraudulent usage. This procedure is executed within strict rules established in United States Code, Title 18, Part I, Chapter 63.

I understand that all charges will show up on my credit card statement as: SaveMeFromForeclosure.biz or REIMarketingTips.biz.

By signing this form, I confirm that I have read and agree to the Terms and Services of the Foreclosure Marketing Machine Program that are found at: www.TheForeclosureMarketingMachine.com/termsandservices.php

I also agree to the terms in this Credit Card Authorization Form.

Printed Name: _____

Signature: _____

Date: ____/____/____

Please fax back to: 360-306-5933