



13905 W. Wainwright Dr.
Boise, ID 83713
Phone: (866) 377-3311
Fax: (208) 376-4567

Recurring Credit Card Payment Authorization

How Recurring Payments Work

You authorize Mountain West IRA to use the credit card indicated below to charge fees to your credit card on file.

You will be charged each billing period, or as fees occur, for the total amount due. A receipt will be emailed to you and the charge will appear on your credit card statement. You agree that no prior-notification will be provided.

You may cancel this automatic billing at any time by calling our office at (866) 377-3311.

Account Holder 1 Name: _____ Account No 1: _____

Account Holder 2 Name:* _____ Account No 2:* _____

**Only necessary when the credit card will be on file for more than one Mountain West IRA account.*

Exact Name on Card: _____

Card #: _____ Exp. Date: _____ CVV Code: _____

Billing Address: _____

City: _____ State: _____ ZIP: _____

Authorized Cardholder Signature

Date

DELIVERY INSTRUCTIONS

FOR PRIVACY PURPOSES, PLEASE DO NOT SEND YOUR AUTHORIZATION FORM BY EMAIL.

MAIL:

Mountain West IRA
13905 W. Wainwright Dr.
Boise, ID 83713

FAX:

(208) 376-4567
C/o Accounts Receivable