

Card Billing and Authorization

All Secure	ex Filings LLC	SEC EDGA	R filing service	es render	ed will be billed to	the credit card below:	
CREDIT (CARD TYPE	(select one)					
	MASTERCARD VISA				AMERICAN EXPRESS DISCOVER		
credit card	d number, acc	count name,	and billing add	ress to b		edit card statement. We will need to match the your account. The most frequent cause of n file.	
Name on Credit Card: (Exactly as printed)							
Credit Card Billing Address: (Street, Apt#)							
City, Stat	e, Zip:						
Credit Ca	rd Number:						
Expiration Date:					CV2 Code	(3 digit security code on reverse of card)	
Service A	greement on t	the Securex	Filings LLC we	eb site, h	-	to the terms and conditions set forth in the al_statement.htm. I warrant that I have valid	
my accou	nt. Since my	payment am	ount varies ea	ch invoic	e, I will receive an	ve for all SEC EDGAR filing invoices posted to invoice via email and I agree that my card will by letter or email to accounting@secfile.net.	
Company Name					Securex Account Number		
Cardholder Signature					Today's Date		
Printed Name					Title	Title	