

**CREDIT CARD PAYMENT AUTHORIZATION**

Yes, I would like to take advantage of the security and convenience of electronic funds transfer scheduled or periodic payments. As a duly authorized signer on the credit card company account identified below, I authorize Integrated Wealth Counselors, LLC, either directly or through its agent, The CFO Group, Inc., ("IWC") to charge my account for payments due or when applicable, and to apply any electronic funds transfer credits to the same, as indicated below.

_____ single	Date of Transaction*: _____ Amount: \$_____._____
OR	
_____ recurring	Date of Initial Transaction*: _____ Periodic Amount: \$_____._____ Number of Transactions _____ or until authorization revoked

\*Transactions will post on or after the date indicated. For recurring transactions, payments will be charged to your account on each month on the same day of the month as the initial transaction, or as soon thereafter as is possible.

This authorization is to remain in full force and effect until IWC has received written notification of its termination in such time and in such manner as to afford IWC a reasonable opportunity to act on it or the until the term of the authorization expires. Any such notice should be delivered to IWC at the address provided on the following account information page.

**CREDIT CARD INFORMATION**

Type of Account: \_\_\_ Visa/ \_\_\_ Master Card/ \_\_\_ Other \_\_\_\_\_  
(check one. If "other" please list card type)  
Authorized Cardholder's Name as spelled on card: \_\_\_\_\_  
Credit Card Number: \_\_\_\_\_  
Expiration Month \_\_\_\_\_; Year \_\_\_\_\_; Verification Code \_\_\_\_\_  
(Last 3 numbers on back of card)  
Billing address: \_\_\_\_\_  
\_\_\_\_\_

**I UNDERSTAND AND AUTHORIZE ALL OF THE ABOVE:**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Print Name: \_\_\_\_\_

**IWC CONTACT INFORMATION:**

All written notices should be delivered to IWC at the following address:

INTEGRATED WEALTH COUNSELORS  
c/o THE CFO GROUP, INC.  
4745 Caughlin Pkwy  
Reno, NV 89519

Telephone (775) 530-8811  
Fax: (800) 868-8051  
E-Mail: [rcain@iwcp.com](mailto:rcain@iwcp.com)