



MUSICMAKERS

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AUTOMATIC RECURRING BILLING AUTHORIZATION

I, _____, authorize Musicmakers Instruments to withdraw
Customer's Name

_____ payments from my bank account (listed below) in the amount of _____.
Number of payments (max of 23) Balance due / # of payments

Payments will be withdrawn on the _____ day of the month beginning _____.
Day of the Month MM/DD/YYYY

MY ACCOUNT INFORMATION IS AS FOLLOWS:

Bank Name: _____

Routing Number: _____
9 Digits

Account Type: _____
Checking or Savings

Account Number: _____

This payment authorization is valid and to remain in effect until I, _____
Customer's Name

either A) pay off the harp, in full or B) notify Musicmakers Instruments of my need to modify the agreement.

Customer Signature: _____

Customer Printed Name: _____

Date: _____