



HYH Consulting II, LLC

Office of Bo Yun Han, CFE, EA

CHECK DRAFT / CREDIT CARD AUTHORIZATION

성명/상호 NAME or BUSINESS NAME:		지급인 Payer:	
주소 ADDRESS:			
전화번호 TELEPHONE #S:		팩스 FAX:	
EMAIL:		PAYMENT METHOD:	CHECK OR CREDITCARD

I authorize HYH CONSULTING II, LLC to initiate either an electronic debit or to create and process a demand draft against my bank account or charge my credit card for the amount of \$_____.

CHECKING ACCOUNT

My account information is as follows:

Bank Information: **정확한 정보교환을 위해 VOIDED CHECK 를 함께 보내주시면 감사하겠습니다**
please enclose a copy of voided check

Bank ABA(Routing) Number: _____ Name of Bank: _____

Bank Account Number: _____

Bank Account Type: circle one → [Checking / Savings / Business Checking]

-OR-

CREDIT CARD

My Credit Card account information is as follows:

VISA MC Discover Amex

_____ EXP Date ___/___ CVV CODE (Visa/MC/Disc) _____ (Amex) _____

SIGNATURE OF AUTHORIZED PERSON

DATE

Ask us about our Insurance Products: Home, Auto, Business, Life & Health