

GOLDENBERG, HEHMEYER & COMPANY

141 W. Jackson Blvd.
Suite 1701 A
Chicago, IL 60604
312-922-8189- fax
312-356-6327 phone customer service

DATE: _____

NAME: _____

ATTENTION: Goldenberg, Hehmeyer & Company Accounting Department

Please use this letter as your authorization to debit my GHCO Account Number: _____

The purpose for the withdrawal of funds from my GHCO Account is:
(Please check all that apply)

_____ **COMPUTER/SOFTWARE PURCHASES:** Maximum Dollar Amount: _____

_____ **MONTHLY CHARGES (QUOTES/TELECOMMUNICATIONS/BADGES/BOOTH RENTAL/SUBSCRIPTIONS)**
(If this line is marked, this letter will suffice until further notice). _____

_____ **MAINTENANCE WORK ORDERS (EX. LAPTOP INSTALLATION, ELECTRICAL WORK)**

Please sign, date, and return to Goldenberg, Hehmeyer & Company, Attention: Accounting Department.

ALL TT License require a 30 day cancellation period.

To cancel your license please e-mail customerservice@ghco.com

Signature

Date