



INSTRUCTIONS:

- 1.) Print your full name and initial each item in the top section below.
- 2.) Affix your VOIDED check below, (for verification of the account information).
- 3.) Sign and date the bottom of this authorization form.
- 4.) Scan or copy the complete form, then attach to an email and send to ajcosens@gmail.com.
(Or you can upload to a file sharing service and provide a download link to the same email address.)

CHECK DRAFT AUTHORIZATION FORM

I, _____ (print name), hereby authorize the creation of a one-time check draft in the amount of \$1,000.00 USD to ALAN COSENS for payment for the Genesis Elite digital products library. _____ (initial)

I agree that this purchase is non-refundable for any reason. _____ (initial)

I agree that I will have access to the Genesis Elite library upon manual confirmation of my purchase by ALAN COSENS, after this check clears for payment. _____ (initial)

PLACE VOIDED CHECK HERE FACE UP

Signature

Date

Your completion of this authorization form helps us to protect you, our valued customers, from fraud.
All information entered on this form will be kept strictly confidential.