



Ledsion Lighting offers five options for customer payment. Please select one for your convenience. The detail is as below:

Option1: E-check ACH – No fee on customers

Customer eCheck Authorization form

I authorize **Ledsion Lighting** to initiate either an electronic debit or to create and process a demand draft against my bank account on or after ____/____/____. I acknowledge that the origination of ACH transactions to my account must comply with the provisioning of United States law. My account information is as follows:

Bank Name:	
Bank ABA Number:	
Bank Account Number:	
Name on Account:	
Bank Account Type:	____ Checking / ____ Savings / ____ Business Checking

Customer Signature: _____

Customer Printed Name: _____

Phone Number: _____

Date: _____

Option2: Credit Card Payment - Convenience charges applies

Sign and complete this form to authorize **Ledsion Lighting** to make a one time or multiple time debit to your credit card listed below. All credit card charges are subject to have 4% credit card convenience fee

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize Ledsion Lighting to charge my credit card
(full name)

account indicated below for _____ with additional 4% credit card convenience charge. This payment is for _____
(amount)

This payment is for _____.
(description of goods/services)

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Can we save your credit card on files for future purchase? Yes ___ / No ___

Account Type: <input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> AMEX	<input type="checkbox"/> Discover
Cardholder Name _____			
Account Number _____	CVV: _____		
Expiration Date _____			

SIGNATURE _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Option3: Bank TT Wire Transfer

Please wire the payment to the following bank account:

Beneficiary Name:	US LEDSION INC
Beneficiary Account Number:	325073644178
Beneficiary Address:	9437 Valley Blvd
Beneficiary City and Zipcode:	Rosemead,CA 91770 USA
Bank Rounting Number (Domestic Wires):	026009593
Bank SWIFT Code (International Wires):	BOFAUS3N
Receiver Bank Name:	Bank of America
Receiver Bank Address:	9437 Valley Blvd
Receiver Bank City and Zipcode:	Rosemead,CA 91770 Los Angeles, California, USA

* Incoming wires are posted to accounts the business day they are received if the beneficiary account number is valid and the account is active. Otherwise, posting may be delayed or wires may be rejected. Posting may also be delayed or wires may be rejected/blocked if parties to a wire are identified as possible OFAC sanctioned entities or appear on other government watch lists, or if the sender's true identity cannot be determined.

Option4: Mail a check

You can mail the check to: **US LEDSION INC**
11321 Indian trail
Dallas, TX 75229

Option5: PAYPAL

You can pay to our paypal account: **info@ledsion.com**

If your term is prepaid or COD, we will process the order until we received the payment.