



**409 Marquette Avenue
509 Hennepin Avenue
Tammy - 612-330-0429**
email: twhiteoak@bakerinvestments.com

I, _____ hereby authorize Downtown Auto Park to take recurring payments for my monthly lease parking for the amount of \$ _____.

Circle the preferred option

MasterCard Visa Discover American Express

Credit Card Number: _____

Expiration Date: _____

I approved the 3% convenience fee for all credit card transactions _____

Or attach a VOIDED check

Financial Institution ABA/Routing number: _____
(9 digit number)

Account Number: _____

Signature for Authorization

Date

*This form should be sent back to Tammy Whiteoak for completion of setup.