



authorHOUSE®
Your Voice in Print

PAYMENT PLAN AGREEMENT

This Payment Plan Agreement (the "Agreement") is made and entered into by and between the person identified below in the Payment Plan Agreement Sign-off Section ("you") and AuthorHouse, Inc. ("we" or "us"). The parties acknowledge and agree that this Agreement becomes part of the Terms and Conditions (attached hereto as Exhibit A and incorporated by reference) with respect to the Work whose title is referenced in the Sign-off Section of this Agreement and pursuant to which we have agreed to distribute the Work and perform other Services as instructed and paid for by you. Capitalized Terms not defined in this Agreement will have the meaning ascribed to such terms in the Terms and Conditions unless the context dictates otherwise.

Eligibility and Requirements:

1. Author must select at least \$498.00 worth of options (excluding data entry and scanning charges) as listed on the Services Order Form.
2. Work, including submission to printer and any additional marketing services, will not be made available until all payments are received.
3. Author agrees that we will receive the full amount due in four equal payments with a \$30 non-refundable processing fee added to the first payment.
4. All subsequent payments will be processed between the 15th -21st of each month.
5. Once scheduled, payment dates may not be changed or skipped.
6. Author agrees that we are not responsible for any overdraft charges they may incur by their financial institution due to non-sufficient funds.
7. In the event of a declined payment, author will be charged a \$20 non-refundable service fee.
8. If a payment is declined for two consecutive months, the authors account will be suspended and all work will be put on production hold.
9. In the event an author's account has been suspended, the author agrees that they will be responsible for contacting their Publishing Consultant to reinstate their account. Reinstatement terms include a \$50 reinstatement fee and full payment of the remaining balance.

Payment Information:

Total Amount Due: \$ _____

Payment #	Monthly Payment Date (Please select one date between the 15th & 21st of each month)	Payment Amount:
One*	_____	\$ _____ +\$30 = _____
Two	_____	\$ _____
Three	_____	\$ _____
Four	_____	\$ _____

**Payment one is due upon author's acceptance of Terms and Conditions. There will be a \$30 non-refundable processing fee added to this payment as agreed upon in the Terms and Conditions.*

Credit Card Information: Visa MasterCard Discover American Express

Name on Card: _____ Card Number: _____

Expiration Date: _____ Signature: _____

Billing Address: _____

Payment Plan Agreement Sign-Off

I have read the Payment Plan Agreement. I understand and accept all its terms in full.

Author Name (printed): _____ Date: _____

Author Signature: _____

Work's Title and ID: _____

Return this page to:
AuthorHouse
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For Faster Service, Fax: 812-961-1023