



AUTHORIZATION FOR ON-SITE SUPPORT

I _____ of _____

hereby authorize MicroAide, Inc. to come to our site at _____

Under the following terms and conditions:

Onsite charges will be billable at \$150.00 dollars per hour. Travel charges will be billable

At Contracted Hourly Rate Round Trip Door To Door. I understand that as a first time client,

Payment for services and any software or hardware will be made to MicroAide, Inc.

At the time service is rendered.

Authorization Signature

Title

**Fax back immediately to:
MicroAide, Inc.
Carl P. Giorgio (President)
eFax 610-743-8505
Phone 717-933-4815 or 610-488-7498**

Directions to site:

