



CMI Automatic Bank Draft
RESTART FORM

Check your program: ___ UFP ___ UBP ___ Stage 1 ___ Stage 2

Name on CMI account: _____

NOTE: if you joined as a COMPANY NAME, you must use that and not your personal name.

I am requesting to restart my automatic bank withdrawals.

The month to restart is _____ (<<<What month?).

The last 5 digits of my ID# (SSN or Fed ID) is _____ Phone _____

Check whatever is applicable below:

___ I am a returning member to CMI. I have not purchased in over 3 months.
Reactivate my account activity.

___ UFP/UBP members: Have you missed 2 purchases? I acknowledge that since I have missed at least 2 purchases in a row that I have permanently lost my syndication members.

Please verify your address and phone numbers.

Street City State Zip
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Home phone Work phone Cell phone

Email address: -----
Email (Strongly recommended for military overseas, we do not make international calls)

Check all that apply:

- ___ Restart me at my usual withdrawal/purchase amount.
- ___ I have enclosed the \$20 reject fee that is due. (Required before we restart your draft)
- ___ Change the amount of my coin purchase. (Attach a newly completed bank draft authorization form)
- ___ Change the bank account you are withdrawing from. (Attach a voided check of the new account.)
- ___ I have contacted my bank and the 'account closed' or 'payment stop' condition has been removed.

--> **NOTE:** The 14th is the deadline for requesting any changes, cancellations or restarts to the bank draft.
Requests received after the 14th will take effect on the following month's draft.

Thank you,

Signature Date

Send this to:

CMI Processing Center
7437 S EASTERN AVE #445
LAS VEGAS NV 89123-1505

Or:

FAX: 702.617.3454
EMAIL: dpcmi@yahoo.com
Questions about the bank draft? 702-617-3456