

CREDIT CARD CHARGE AUTHORIZATION

I hereby authorize a credit card charge for the amount listed below. I am aware that a service charge of 3% will be added to my total, and is non-refundable. Cardholder's Initials: _____

Company Name: _____

Street Address: _____

City / State / Zip: _____

Phone / Fax: _____

Payment Information

Circle Payment Option: MC / Visa / Amex

Amount to Charge/Outstanding Balance: _____

Payment for Invoice Number(s): _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Cardholder's Signature: _____

Cardholder Information

Cardholder's Name: _____

Cardholder's Billing Address _____

City/State/Zip/Country: _____

Phone: _____

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Internal Use Only: ☐ CC Verified Auth Code: _____ Initials: _____