



MAXWELL FABRICS INC
925 B Boblett Street
Blaine, Washington
USA 98230

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TOLL FREE FAX 1 800 663 6744
www.maxwellfabrics.com

CREDIT CARD PAYMENT AUTHORIZATION

CUSTOMER DETAILS

Account Number: U _____
Customer Name: _____
Phone number: _____
Email Address: _____

CREDIT CARD INFORMATION

Type of Credit Card:
 Visa
 Mastercard
 American Express

Credit Card No.: _____ Expiration Date: _____
Security Code: _____ Billing Zip Code: _____

CUSTOMER INSTRUCTIONS & SIGNATURE

I authorize Maxwell Fabrics, Inc. to charge credit card listed above as follows:
 for all orders placed on my account. I authorize Maxwell Fabrics to keep my credit card information in my customer profile. Customers will be provided a receipt for all transactions processed.

for the following invoice No.(s): _____ Authorization amount: _____

Name on Card: _____

Signature: _____ Date: _____