



CREDIT CARD AUTHORIZATION FORM

I _____ am an authorized officer of the following company:
(Please print your full name)

Company Name: _____

Customer Name: _____

Corporate Address: _____

City / State / Zip: _____

I am providing the following credit card info: (All fields required)

Name on Card _____

Company on Card _____

Billing Address _____

City / State / Zip _____

Card: Visa • MasterCard • Discover • Amex (Circle One)

Card #: _____

Expire Date: _____

CVV #: _____

I am authorizing Van Teal, Inc. to bill the following charges to my credit card:

(Choose from the following)

Customer #: _____

PO #: _____

Invoice #: _____

I have read this credit card authorization form and understand and accept the terms and conditions and give permission to charge the above card.

Signature _____ Date: _____

IMPORTANT - PLEASE NOTE

Please include a copy of the credit card (front and back) plus a picture I.D. showing signature.

Fax this information back to Van Teal along with this Authorization Contract.

This is needed as a one time procedure only for our records and Your Protection.