

ELP, LLC

Credit Card Authorization Form

Name of Customer: _____

Telephone Number: _____

Type of Card: **Mastercard - American Express - Visa - Discover**

Account Number: _____

Expiration Date: _____ Zip Code _____ CVC: _____

Name on Card: _____

Amount of Purchase: \$ _____

Invoice/Order Number: _____

Approval
Signature: _____

Notes: _____