



**CREDIT CARD PAYMENT AUTHORIZATION FORM**

1. Complete this form and fax back to 1-888-693-9077
2. Upon receipt of this authorization form, your credit card account information will be securely registered.
3. We will book the invoice amount of your order to verify funds are available. Your credit card will be charged after your order has been shipped. If you are using a Debit Card, please note (like renting a car or hotel room) that we will capture funds and they will be released after the Debit Card is charged.
4. We will automatically charge all invoices to your credit card unless we are notified in writing by you.

**CREDIT CARD**

Type  Visa  MasterCard  Discover  AMEX  Debit Card  **(Must have V/MC Logo)**

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Card \_\_\_\_\_

**Card Billing Address (MUST MATCH EXACTLY, otherwise it will delay processing)**

\_\_\_\_\_

\_\_\_\_\_

**By signing below, I authorize Filpac to charge my credit card for all invoices until I notify Filpac in writing.**

Your Name: \_\_\_\_\_

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Filpac Account # (Internal) \_\_\_\_\_