

Eastern Cabinet and Stone LLC

1050W Chandler Blvd, Suite 5, Chandler AZ 85224

Tel: 626-747-2005 Email: easterncabinetandstone@gmail.com

CREDIT CARD AUTHORIZATION FORM

Please print and complete this authorization and return to us.

All information will remain confidential.

I, _____ (card holder) from _____ (Your company name) authorize Eastern Cabinet and Stone LLC to charge the agreement amount list below to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Card Holder Print Name _____

Amount to charge: \$ _____ (USD) (S.O. # _____) (Estimate # _____)

Credit Card Type: _____ Visa / _____ Master Card / _____ Discover

Credit Card Number: _____

Card Identification Number (Last three digits located on the back) _____

Expiration Date: _____

Card Holder Contact Number: _____

Billing Address: _____ City _____ State _____

ZIP Code: _____

*** Once signed, please return the complete form to Eastern Cabinet and Stone LLC by Email:
easterncabinetandstone@gmail.com

Notes:

This form is an authorization issued to Eastern Cabinet and Stone LLC. Eastern Cabinet and Stone LLC is authorized to use this form to charge purchase materials for _____ (Your Company Name) for which including any verbal authorization without any written form.

Card Holder Signature: _____ **Date:** _____