

Credit Card Authorization Form

When an order needs to be shipped to an address different from the billing address, or an order is over \$100, we need to obtain authorization. You can either add the second address as an authorized alternate shipping address by contacting your credit card provider, or you can complete and fax the form back to us.

Instructions

- 1. Complete the form by printing legibly with a dark pen. All billing and shipping information in the blanks below.
- 2. Sign with the credit card holder's signature on the line indicated.
- 3. Include photocopy of the **front** and **back** of the signed credit card.
- 4. Fax all this form, along with the photocopy of the signed credit card, back to us toll free to our secure fax machine at **818.840.0877** to complete your order.

I,(including shipping and/or taxes, if applicable		CHION to charge my credit	card account in the amount	of \$
Frequency of charge: (Please check the appr	opriate space and initial)			
Once Daily	We	ekly	Monthly	-
Type of card: Visa	MasterCard	A	mex	
Name on Card:				
Credit Card Number		Expiration Date:		
CVC Code (Last three digit number on the bar	ck of the card)			
Four digits on front of card (Amex only)	. <u> </u>			
Credit Card Billing Address				
Street:				
City:				
State: Zip Code:				
Telephone:				
Requested Shipping Address				
Street:				
City:				
State: Zip Code:				
Telephone:				
As the credit card holder, I hereby authorize re	eceipt of merchandise at the	shipping address above.		
Cardholder's Signature		Date		

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. All information entered on this form will be kept strictly confidential by ARCHION. Complete and fax all documents required to: 818.840.0777