

Credit Card Authorization Form

CUSTOMER # _____

TO: Zack Electronics, Inc. _____

FROM: _____

I, _____ certify that I am the cardholder and that I authorize Zack Electronics, Inc. to charge my credit card:

Credit Card Number _____
Name on Card _____
Expiration Date _____
Security Code _____

Credit Card Billing Address

A copy of my credit card and drivers license is attached.

This written authorization will guarantee that after receipt of the merchandise, I will not charge back or deny payment.

Signed: _____

Date: _____