

# Digital Wireless Store

5460 Florin Perkins Rd, Sacramento, CA 95826

Tel: (916) 856-1800 Fax: (916) 854-1897

Website: <http://www.dwimport.com>

E-mail: [info@dwimport.com](mailto:info@dwimport.com)

## Customer Credit Card Authorization Form

To prevent unauthorized use of your credit card, we require this authorization form to be completed.

- Print this form
- Type or fill out form legibly in ink
- Authorize the charges to your credit card by signing below
- Include a clear copy photocopy of the front and back of your signed card
- Fax from to (916) 854-1897

### Credit Card Information

Credit Card Type:  Visa  Master

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

Card Identification Number: \_\_\_\_\_ (CVV Code)

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

Card Holder Name: \_\_\_\_\_

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

### Card Holders Billing Address (as it appears on credit card statement)

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Please reference the picture on the right for the location of this number)

As the credit card holder, I understand that by signing this form, I hereby authorize the purchase of services/ merchandise from the Digital Wireless Store. Using this Credit Card Authorization Form I will pay for this purchase, or unpaid balance and indemnify and hold the Digital Wireless Store LLC harmless against any liability pursuant to this authorization. I understand that my signature on this form will serve as authorized signature on the credit card charge slip. This authorization is valid until the date of expiration of card or on demand.

Print Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Please confirm the amount you are authorizing: \$ \_\_\_\_\_ / To be determined (for Recurring purchase or Unpaid balance)

Card Holder's Signature: \_\_\_\_\_ (by entering your name here, you authorize Digital Wireless to charge your credit card)

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