

CENTRAL VALLEY HARDWARE
P.O. BOX 2008
STOCKTON, CA 95201-2008
(209) 464-7305 Telephone
(209) 464-1737 Fax

Date:

To: _____ Telephone #: _____

From: _____

Credit Card Payment Authorization

Visa _____ MasterCard _____ American Express _____

Name of Cardholder _____

Mailing Address _____

(The address at which you receive your credit card statement, including zip code)

Card Number _____ Exp. Date _____

CVC#: _____ (Last three digits located on signature line on reverse side of card)

You are giving your authorization for above card number to be kept on file for future transactions*: Yes _____ No _____ (Required information please check)

Dollar amount of any future single transaction shall not exceed:

\$ _____ (example: \$250.00)

*Verbal authorization will still be requested, prior to any future transactions.

(FOR USE AS A ONE TIME AUTHORIZATION ONLY)

Total Amount for single use transaction shall not exceed: \$ _____

The issuer of the card identified above is authorized to pay the "Sum" shown above upon proper presentation. I the cardholder promise to pay such "Sum" subject to and in accordance with applicable law and the agreement governing the use of such card. I understand that the above information is solely for use by "Central Valley Hardware Company" and will be held confidential and under strict security.

Signature _____ Date _____