

Service Credit Card Authorization Form

This form is to be used in lieu of a signed credit card receipt. A separate form is required for each transaction.

The following photocopies must be included with this credit card authorization from:

1. Credit card – both sides (card must bear your signature)

Please fill in the following inform	nation:				
Credit Card Number	Expiration Date		*CVC/V-CODE (see note above)		
Driver's License or I.D. Number	State Card Holder's Name – as it appear on credit card (print clearly)				
Credit card Billing Address:					
		Company Name	/ Name		
Street Address		Suite or A	Suite or Apt. #		
City		S	tate	Zip	
Contact Name	Email Address			Office Hours	
Phone	Office/Other Phone		Cell	Cell Phone	
Credit card will be processed only received prior to a technician being			received. This f	orm must be	
I		_ authorize Coronado I			
maintenance and service at the rat time and 1hour diagnostic to be bil				ge, 1hour travel 	
Print Name	Title		Thank you for your business. Please return this form along with copies of your credit		
(MM/DD/YYYY) Signatu	re of Credit Card	Holder	card to the f	following:	

Service@CoronadoEquipmentSales.com Mary@CoronadoEquiomentSales.com