

sealersales

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***ONE TIME CREDIT CARD PAYMENT AUTHORIZATION FORM**

Sign and complete this form to authorize Sealer Sales, Inc. to make a one-time debit to your credit card listed below. By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date.

Cardholders' Name: _____ Phone No. _____

Company Name: _____

Shipping Address for this order: _____

Billing Address: _____

Type of Credit Card: VISA Mastercard Amex

Credit Card Number _____

Exp Date _____ Security Code _____

This payment is for Invoice/Purchase Order # _____

I hereby authorize: Sealer Sales to charge my credit card in the amount of _____ USD.

** SIGNATURE REQUIRED**

I authorize Sealer Sales, Inc. to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the invoice(s)/services described above, for the amount indicated above only, and is valid for one-time use only. I certify that I am an authorized user for this credit card and that I will not dispute the payment with my credit card company; as long as the transaction corresponds to the terms indicated in this form.

Signature: _____

Date: _____

INTERNAL USE ONLY:

Authorization Requested by:

Fax: 818.718.8857

Date: _____

Attn: _____

Form Rev: 01/20

Your One Stop Source for Sealers