

CREDIT CARD PAYMENT AUTHORIZATION FORM

- 1) Once completed email to sales@filpac.net or fax to 1-888-839-4967
- 2) Upon receipt of this authorization form, your credit card account information will be securely registered.
- 3) We will authorize the order amount to verify funds are available. Your credit card will be settled at time of shipment.
- 4) **DEBIT CARD USERS - Please note (like renting a car) that we will authorize order amount(s) and settle at time of shipment. Please be aware depending on your bank you may see multiple authorizations that could take up to 5 business days to fall off.**
- 5) We will charge all invoices to your credit card.

CREDIT CARD

Type Visa MasterCard Discover AMEX Debit Card w-MC/V

Card Number _____

Expiration Date _____ CVV# _____

Name on Card _____

Card Billing Address (MUST MATCH EXACTLY, otherwise it will delay processing)

By signing below, I authorize Filpac to charge my credit card for all invoices until I notify Filpac in writing.

Your Name: _____

Date: _____

Business Name: _____

Signature: _____

Filpac Customer # _____

