



## Credit Card Authorization Form

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

Billing Name (as it appears on credit card) X \_\_\_\_\_

Credit Card No. X \_\_\_\_\_

Vin code (3 digits on back on card) X \_\_\_\_\_

Credit Card Exp. Date X \_\_\_\_\_

Street Address X \_\_\_\_\_

Zip Code X \_\_\_\_\_

Invoice No. X \_\_\_\_\_

Amount Authorized X \_\_\_\_\_

Customer Name X \_\_\_\_\_

Customer Signature X \_\_\_\_\_

### Special Notes

\_\_\_\_\_  
\_\_\_\_\_

**To keep credit card information on file for future purchases - please authorize below:**

I, \_\_\_\_\_ authorize Farnsworth Wholesale Co. to run my credit card for amounts given via verbal authorization over the phone.

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