

Advance LED Supply

5404 San Fernando RD.

Glendale CA 91203

818-649-1999

Credit Card Authorization Form

Please note, your credit card will be charged the corresponding amount if your account is past due more than 45 days. No prior notification of each charge will be provided if the account is delinquent.

Please complete the information below:

I _____ authorize **Advance LED Supply** to charge my credit card
(full name)

account indicated below for \$ _____ on or after _____. This payment is for
(date)

LED Lights.

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: ☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

SIGNATURE _____

DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount owed in full. I certify that I am an authorized user of this card and that I will not dispute the payment with my credit/debit card company, so long as the transaction corresponds to the terms indicated in this form.