

Credit Card Payment Authorization



I _____ authorize Rock and Roll Trailers, LLC to charge my credit card account indicated below for \$ _____ on _____
(Amount \$) (Date)

This payment is for _____
(Description of Goods/Services)

Billing Information

Billing Address _____ Phone # _____

City, State, Zip _____ Email _____

Card Details

Visa MasterCard Discover American Express

Cardholder Name _____

Account/CC Number _____

Expiration Date _____

CVV _____

I authorize Rock and Roll Trailers, LLC 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 indicated above only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE _____

DATE _____