

Affordable Cellular LLC
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Troy, MI 48098
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CREDIT CARD AUTHORIZATION FORM

PLEASE READ: DO NOT HAND WRITE, TYPE ONLY!

Form must be completed in full, signed and authorized by the credit card holder, along with a clear copy of the front and back of the credit card and authorized user driver's license showing signature and picture. This form must be received and confirmed by Affordable Cellular LLC. before any orders are placed. If you fail to comply with these requirements we will not be able to process your order.

COMPANY NAME: _____

CARD HOLDER NAME (NAME AS IT APPEARS ON CARD): _____

BILLING ADDRESS (AS IT APPEARS ON YOUR CREDIT CARD STATEMENT):

TELEPHONE NUMBER: _____ E-MAIL ADDRESS: _____

SHIPPING ADDRESS (IF DIFFERENT FROM BILLING):

AMOUNT \$ _____ REFERENCED TO INVOICE# _____ ON ____ / ____ / ____ (DATE)

CREDIT CARD TYPE: VISA MASTERCARD

CREDIT CARD NUMBER: _____

EXPIRATION DATE: ____ / ____ / ____ CVV CODE: _____

I AUTHORIZE AFFORDABLE CELLULAR LLC. TO CHARGE MY PURCHASES ON THE ABOVE REFERENCED CREDIT CARD. IN CHOOSING TO USE THIS CARD PAYMNET METHOD, I GUARANTEE THAT THERE WILL BE NO REFUND ON SHIPPING & HANDLING FEES (2way). I WAIVE ALL MY LEGAL RIGHTS OF CREDIT CARD CHARGE DISPUTE IN ALL FIFTY STATES OF THE UNITED STATES OF AMERICA AND IN ANY OTHER COUNTRY. IN THE EVENT OF A RETURNED SHIPMENT DUE TO REFUSAL ACCEPTING, A 10% RESTOCKING FEE FOR THE FEFUSED GOOD WILL APPLY.

CARD HOLDER NAME (PRINT PLEASE): _____ DATE: _____

CARD HOLDER SIGNATURE : _____ DATE: _____

Check this box if your prefer to use this credit card for all future orders, please complete the following:

I, _____ authorize **AFFORDABLE CELLULAR LLC** to use the above referenced credit card account for all future orders.

Cardholder Signature/Charge Authorization: _____ Date Authorized: ____ / ____ / ____

PLEASE NOTE: IF YOU DO NOT CHECK THE ABOVE BOX YOU WILL HAVE TO PROVIDE US WITH THIS FORM EVERY TIME YOU PLACE AN ORDER WITH US.
