



# CHRISTOPHER HYLAND INCORPORATED

## CREDIT CARD AUTHORIZATION FORM

**Invoice #(s):** \_\_\_\_\_ (must list all invoice numbers here).

Company Name: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

C.C. Billing Address: \_\_\_\_\_

\_\_\_\_\_ **Zip Code:** \_\_\_\_\_

Telephone: \_\_\_\_\_

**Credit Card Type:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_

**CC Verification Code:** \_\_\_\_\_ (found in signature area on back of card)

**Expiration Date:** \_\_\_\_\_

I authorize Christopher Hyland, Inc. to charge my credit card number indicated above in the amount of **(this must be written out in longhand)**:

\_\_\_\_\_ dollars.

( \$ \_\_\_\_\_ . \_\_\_\_\_ )

I AM FULLY AWARE THAT CHRISTOPHER HYLAND, INC. DOES NOT ACCEPT RETURNS OR EXCHANGES AND THAT ALL SALES ARE FINAL. MY SIGNATURE HEREIN BELOW CONFIRMS MY ACCEPTANCE OF ALL THAT IS STATED ABOVE.

Cardholder Signature: \_\_\_\_\_

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