



216 EAST STATE ROAD 436  
 CASSELBERRY, FL 32707  
 PH:(407) 830-5455  
 FAX:(407) 830-5355

**CREDIT CARD AUTHORIZATION**



For FM Computer Warehouse, Inc. Invoice# \_\_\_\_\_, I hereby knowingly and willing authorize \_\_\_\_\_ to purchase the invoiced items by charging my Credit Card ( ) VISA ( ) MASTERCARD ( ) AMERICAN EXPRESS.

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_ / \_\_

In the amount of \$ \_\_\_\_\_

The following information must be completed:

**PART1:**

Business/Corporate Card: \_\_\_\_\_

Consumer Card: \_\_\_\_\_

Card holder Signature: \_\_\_\_\_

Authorized Name of Cardholder \_\_\_\_\_

Card holder Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**PART2:**

Dealer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

**PART3:**

Purchaser (Signature) \_\_\_\_\_

Purchaser (Print Name) \_\_\_\_\_

A copy of the Purchaser's Drivers License will also be needed at the time of purchase

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BY: \_\_\_\_\_ POSITION: \_\_\_\_\_ DATE: \_\_\_\_\_