



250 West 40th Street, 15th Floor,
New York NY 10018
Ph: 212- 741-3999 Fax: 212-627-7937

Credit Card Authorization Form

CUSTOMER INFORMATION

Name: _____

Job # : _____

Invoice Amount: _____ + 3.5 % Processing Fee _____

Total Amount of Debit : _____

CARDHOLDER INFORMATION

Name: _____

Billing Street Address: _____

City: _____ State: _____ Postal Code: _____

Country: _____ Email _____

Direct Telephone: (_____) _____ - _____

CREDIT CARD INFORMATION

We hereby authorize Green Earth Enterprise to debit my:

Credit Card Type: MasterCard Visa American Express Discover Card

Number: _____ Expiration Month: _____

Expiration Year _____ Security Code: _____

Cardholder Signature X _____ Date ____ / ____ / ____