



4635 S 33rd Street - Phoenix AZ 85040 - Phone 480-295-1676

CREDIT CARD AUTHORIZATION CONSENT FORM

I, _____ hereby authorization DFO Filters & Equipment to charge my credit card for agreed upon purchases.

Type of Card: VISA MASTERCARD DISCOVER AMEX

Credit Card Number: _____

Expiration Date: _____

CVV Code: _____

Name of Cardholder: _____

C/C Billing Address: _____

City, State & Zip: _____

Receipts E-mail: _____

Authorized Signature of Cardholder: _____

By signing this, I certify that I am the authorized holder and signer of the credit card referenced above. I certify that all information above is complete and accurate. I understand that this authority will remain in effect until I send DFO a written cancellation notice. I acknowledge and accept DFO Filters & Equipment's Terms and Conditions.

Signature: _____ Date: _____