



## CREDIT CARD AUTHORIZATION

VISA / MASTERCARD / AMERICAN EXPRESS ONLY

Authorization to purchase products, goods and services from TriLift on a continuing basis using the credit cards described herein and the terms described below, unless otherwise instructed in writing by the credit card holder.

Type of Card:  VISA  MASTERCARD  AMERICAN EXPRESS

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

Expiration Date \_\_\_\_\_ CVC Code (last three digits on the number on the back of the card) \_\_\_\_\_

### Credit Card Billing Address

### Requested Shipping Address

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

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

As the credit card holder, I hereby authorize receipt of merchandise at the shipping address above.

Cardholder's Signature \_\_\_\_\_

Date \_\_\_\_\_

I, \_\_\_\_\_, the undersigned hereby states that the above described credit card is in my name and that I authorize its use to purchase products and services from TriLift and that the total purchases cost will be priced by the United States Currency. Orders for sold goods are to be placed by representatives and employers of the above described company via telephone, fax, computer transmission, in writing or verbally to filed sales representative.

**Please Complete All Required Information and Fax to: 818.778-6714.**

Your completion of this authorization form helps us to protect you, our valued customer, from credit card fraud. All information entered on this form will be kept strictly confidential by TriLift.

TRILIFT MOBILITY

8021 LANGDON AVE # A, VAN NUYS, CA 91406

: 818.778-6709 FAX: 818. 778-6714

www.triliftmobility.com