

Credit Card Authorization Form

Sign and complete this form to authorize Apure Distribution, LLC to make a one-time charge to your credit card listed below.

By signing this form, you give Apure Distribution, LLC permission to charge your account for the amount on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

I	authorize Apure	Distribution, LLC to	charge by credit card
indicated below for:			
This payment is for Draft/Order/	Invoice Number:		_
Billing Information			
Billing Address			_
City	State	Zip	
Email	Phor	ne	
Card Details			
☐ Visa ☐ Master Card	☐ American Ex	press	
Cardholder Name			
Credit Card Number			
Expiration Date/	_		
CVV / Security Code	Billing Zi	o Code	
I authorize the above named but according to the terms outlined a above, for the amount indicated authorized user of this credit car so long as the transaction correst By signing below, I additionally a official Apure Distribution, LLC w	above. This payment a above only, and is valind and that I will not dis sponds to the terms income	authorization is for the id for one (1) time us spute the payment we dicated in this form. conditions of sale we	e goods/services described se only. I certify that I am ar ith my credit card company
Cardholder Signature:			
Date:			