



CREDIT CARD AUTHORITY FORM

ATTENTION: (MIM CONTACT) _____

RE INVOICE NBR: _____

Please debit my credit card as follows:

TYPE OF CARD: VISA MASTERCARD AMEX
(PLEASE CIRCLE ONE)

CUSTOMER NAME: _____

NAME ON CARD: _____

AUTHORISED DEBIT VALUE: \$ _____

NB: Please remember to include 1.75% service fee for Visa, MasterCard & BankCard or 4% service fee for Amex.

CARD NBR: ____ / ____ / ____ / ____

CSV NBR: ____ (3 OR 4 DIGIT SECURITY CODE ON REAR OF CARD)

EXPIRY DATE: ____ / ____

I _____ (the undersigned), do hereby give my Approval for Movements International Movers to arrange payment of the above mentioned amount via my credit card account.

CARD HOLDERS SIGNATURE: _____

DATE: _____ **CONTACT NBR:** _____

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OFFICE USE ONLY:

Authorisation Number:	
Customer Name:	
Invoice No(s):	
Date:	

