



Commercial Custom Seating & Upholstery, Inc.
 12601 Western Avenue, Garden Grove, CA 92841
 Tel (714) 850-0520 | Fax (714) 850-0577 | www.ccs-ind.com
Questions about this form, please call or email: AR@ccs-ind.com



Credit Card Authorization Form

Visa/MC/Amex/Disc

PAYMENT INFORMATION

Authorized Amount:	\$	
Invoice/Job Reference #'s to be paid:		

PLEASE CHECK ALL APPLICABLE ITEMS BELOW

- (A) _____ Use card information below for purchase/payment in the amount indicated above.
- _____ Retain this card information for future purchases/payments.
- _____ Do not retain this card information for future purchases/payments.
- (B) _____ Use card number already on file ending in number _____ (fill in last 4 digits)

CARD INFORMATION

Card Number:	
Expiration Date (MMYY):	
CVV Code:	
Company:	
First Name:	
Last Name:	
Billing Address Line 1:	
Billing Address Line 2:	
Billing City:	
Billing State/Province:	
Billing Postal Code:	
Billing Country:	
E-mail Address:	
Phone Number:	

By signing this form, you authorize Commercial Custom Seating & Upholstery, Inc. to charge your card for the amount listed above, and, if indicated above, to retain this card information on file for future purchases/payments.

Signed: _____ Print Name: _____ Date: _____

Thank you for your business.

***** PLEASE FAX BACK TO CCS AR TEAM AT (714) 850-0577 *****