



Credit Card Payment Authorization Form

Accounting Department
 2802 W Virginia Ave
 Phoenix, AZ 85009
 Phone: 1-800-875-BIGD
 Fax: 1-602-352-0747

A copy of the Card Holders Valid ID and a Credit Card (front and back) are required to process transaction(s).
 Please scan and submit a copy with this form.

(Check One)

<input type="checkbox"/> First Time Authorization	<input type="checkbox"/> Update Information	<input type="checkbox"/> Change Authorization
<input type="checkbox"/> Recurring Authorization	<input type="checkbox"/> One-Time Authorization	

Payer Information (Please PRINT)

Name of person authorizing payment:		
Name of business (if applicable):		
Business address (if applicable):		
City:	State:	Zip:

Credit Card Account Information (PLEASE PRINT)

Card-holder name (exactly how it appears on card):												
Credit card billing address:												
City:						State:			Zip:			
Credit card type:	Mastercard/ Visa			Discover			American Express					
Credit card number: (Mastercard, Visa, Discover)												
Expiration date (mm/yy):			/	Security code (3-digit code on back):								
Credit card number: (American Express)												
Expiration date (mm/yy):			/	Security code (4-digit code on front):								

Payment Authorization

By completing and executing this form, the card-holder acknowledges and agrees that Big D Floor Covering Supplies (hereafter "Company") is authorized as of the authorization date set forth below and subject to the terms and conditions set forth below, to charge the credit card, debit card, charge card or other payment card (each referred to herein as "credit card"), specified amounts billed to the account-holder or the card-holder specified above for services rendered.

Company will send the account-holder or card-holder an invoice for services rendered. Company will charge the above credit card for the amount specified in the invoice on the date of the invoice. The account-holder/card-holder should ensure such charge will not cause the credit card account to exceed any established credit limits or available balances as on the date of charge. There will be a \$25.00 penalty for any rejected charge pursuant to this authorization. Card-holder acknowledges that they will continue to be liable for any such rejected or any unpaid charges including all penalties. Card-holder further authorizes Company to initiate a charge or credit as necessary to correct any prior overpayment or underpayment of any invoice or any other charge or credit effected under this or prior authorization(s). Company and card-holder further acknowledge that if this payment authorization is for a recurring charge, then Company will inform card-holder of any variances in the recurring amount. Each charge will appear as a payment on the next invoice sent to account-holder/card-holder after the charge date. Recurring charges will begin with the first invoice we send the account-holder/card-holder after we receive and process this form.

To Update/Cancel the above credit card information, please execute this form and check "Update information" or "Cancel authorization" and fax back to number provided below. This authorization shall remain in effect until Big D Floor Covering Supplies receives a new form requesting an update or cancellation, and Big D Floor Covering Supplies has had sufficient time to clear any arrears and act on the authorization. Card-holder will continue to be liable for any invoices due and pending as of such termination. Card-holder is responsible for informing Company of any changes in the above information.

I, _____, hereby authorize Big D Floor Covering Supplies, to make charges in the amount of \$_____ to my Credit Card in consideration for products as requested by me.

Signature of card-holder:	Authorization date:
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