

Credit Card Authorization
Fax 1-800-476-1336
Phone 1-800-476-9914

This Document authorizes All Purpose Handyman services, Inc. to use the following Credit Card for payment as indicated below

Cardholder Name _____

Billing Address _____

City _____ same address where statements are received State _____ Zip _____

Phone() _____ Fax() _____

Credit Card Type Mastercard Visa
 Discover American Express

Credit Card Number _____

Name of bank _____

Expiration Date mo. ____ / yr. ____ V-Code _____

Bank Phone Number on back of card () _____

Invoice/Sale Order Number _____ Date Authorized _____

Authorized Amount \$

I, _____, authorize All Purpose Handyman Services, Inc. to Debit my credit card for the amount shown above and I assume final responsibility for the charges.

Signed by _____ Print Name _____

This Form must be completed in FULL, signed by an authorized user of the credit card, faxed or mailed & received by All Purpose Handyman Services, Inc. to be processed.. All C.O.D. sales are final, All materials that are special orders or custom are non-cancelable and nonrefundable.