

CREDIT CARD AUTHORIZATION

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ONE TIME CREDIT CARD PAYMENT AUTHORIZATION FORM

Sign and complete this form to authorize Vetech Enterprise Inc. DBA BZBGEAR to make a one-time debit to your credit card listed below.

By signing this form, you give us permission to debit your account for the amount indicated 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.

CUSTON	MER NAME:				
	MASTERCARD	VISA	DISCOVER	AMEX	
CREDIT	CARD #		EXPIRES/	CSV	
COUNT	RY WHERE CARD WAS	ISSUED			
	DERSTAND THAT MY SIG TURE ON THE CREDIT C		HIS CONTRACT WILL SEI	RVE AS MY AUTHORIZED	
NAME ON CREDIT CARD			COMPANY NAME		
BILLING ADDRESS OF CREDIT CARD			CITY, STATE, ZIP CODE		
PHONE NUMBER			FAX NUMBER		
to pay, an	d specifically authorize Vetech E	interprise Inc. DBA B	nderstand and agree to the terms ZBGEAR to charge my credit cal statement detailing all of my cha	s set forth in this agreement, agree rd, for the products provided. Vetech arges.	
AUTHORIZED CARD HOLDER'S SIGNATURE			<u>_</u>	DATE	

Please email or fax signed & completed form directly to the credit department. Secure fax number: 1.916.672.2557