

CREDIT/DEBIT CARD AUTHORIZATION FORM

By completing this form, I hereby authorize **Arizona Furnishings** to process transactions using the credit card and/or debit card information provided below. **Please write legibly**!

Company/Purchaser Name:		
Address		
City:	Country/State:	Zip/Postal Code:
E-mail address:		
Credit Card Information		
Credit Card / Debit Card (please circ	le one)	
Issuing Bank if Debit Card		
Card Number:		
Expiration Date:/	3 Digit Security Code on Back of Card:	
Name as Shown on Card:		
Billing Address:		
City:	Country/State:	Zip/Postal Code:
I Authorize Arizona Furn	C	this order only. ALL orders with email authorization.
Customer acknowledges that, if for any reasor payment responsibility with another approved		re declined/denied; the customer assumes
Upon approval, this authority is to remain in f termination in such time and manner as to affousage election above.		received written notification from me of its to act on it, with the exception of the one time
The electronic media record of my transaction determination to resolve any disputes that I may		ation form held by AF shall be used as the final authorized herein.
I have read and accept Arizona Furnishings Te	erms and Conditions.	
Signature: (required)		DATE
Please return this form to Arizona F 85353	'urnishings, 8601 W Was	hington St Ste 300, Tolleson, AZ

Or fax it to 602-484-7825. Attn: Accounting Office

Or email to : ar@furnishaz.com