PFI Phase 4 Investigations

CREDIT CARD AUTHORIZATION FORM

Copyright © 2010 Phase Four Investigations. All Rights Reserved.

Name as it appears on the card: _____

Mailing address this card is billed to: _____

City: _____

State: _____ **Zip:** _____

Card Number: _____

Card Type: _____ _____ **Expiration date:** _____ / _____

Visa **Master Card** **Month** **Year**

Card Verification Number: _____

This number is on the back of the card and is the last three numbers separate from the other numbers

Amount to Charge: _____

Michigan Residents
Add 6% Tax on
Non-service related items: _____

Total Amount Charged: _____

Charge on this card will appear as "Phase Four"

"I authorize Phase Four Investigations / Sterling Spy Gear and its representatives, to process a charge on the above account, for deposit into the agency account and credit any outstanding invoices, as follows"

_____

Card holder's signature

Your Credit Card will be verified with the bank prior to commencement of your requested service and before the release of any information

_____

Date