



4139 E BELL RD.  
PHOENIX, AZ 85032  
602-971-8110 Phone  
602-971-0212 Fax

**CREDIT CARD CHARGE AUTHORIZATION FORM**

Visa, Master Card, American Express, Discover

Please complete, sign and return by fax to 602-971-0212 or email sales@greengoddess.com

I, Cardholder \_\_\_\_\_

Authorize to charge my credit card in the amount of \$ \_\_\_\_\_

For (reference invoice number) \_\_\_\_\_

Card (Please Check one)

- Visa
- Master Card
- American Express
- Discover

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code (3 digit on back for Visa, M/C and Discover or 4 digit on Front for AmEx) \_\_\_\_\_

Card Holders Billing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

**Failure to complete this form will delay your order from being processed.**

**I have Read, Understood, and Agreed with the terms listed above.**

Signature \_\_\_\_\_ Date \_\_\_\_\_