



# ALM Web Pros, LLC

specialists in growing your business

## Credit Card Authorization Form

Customer's name: \_\_\_\_\_ Domain Name: \_\_\_\_\_

Name exactly as it appears on credit card: \_\_\_\_\_

Credit card billing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ American Express \_\_\_\_\_ Discover

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_/\_\_/\_\_

Credit Card Identification Number (see below): \_\_\_\_\_

Amount to be charged on credit card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

**\* Locating the Credit Card Identification Number**

The **4-digit** security code is printed above your account number on the **face** of your card.



Please fax this form back to: (208) 988-9646. For security reasons, do not e-mail credit card information. For verification purposes, please make sure that you provide the credit card billing address where your statement are received. If you have any questions or concerns you can use any of the following options:

- Call Monday – Friday, 9:00 a.m. -5:00 p.m., EST, Toll-free (800) 252-0234, Extension 2
- E-mail your questions to [accounting@almwebpros.com](mailto:accounting@almwebpros.com)
- Visit [www.almwebpros.com](http://www.almwebpros.com) and execute our online contact form

I, the undersigned, agree to a one time charge of \$\_\_\_\_\_ on the credit card detailed above for services received from ALM Web Pros in reference to Invoice # \_\_\_\_\_ or Quote # \_\_\_\_\_. I agree that I am satisfied with the services received and agree to not charge back this amount. I have been informed that the charges will appear on my credit card statement as: ALM Web Pros, LLC.

Name of Client: \_\_\_\_\_ Title: \_\_\_\_\_

Domain Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_/\_\_/\_\_