

Credit Card Charge Authorization or **Check Payment**  
We accept VISA and Mastercard

**To Pay by Check:** Complete your name, address, and description of service rendered. Mail it with your check to the address shown below. Fax a copy so that we reserve your space.

Description of Service Rendered: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_

CARD TYPE: \_\_\_\_\_ (MC, VISA)

CREDIT CARD BILLING ADDRESS:

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTACT PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_

I authorize Phoenix Computer Consultants, LLC to charge my credit card account for the services and products authorized by me. I agree to pay all charges according to the Terms of Sale. I agree not to charge back any purchases for which service has already been rendered, or for products already received. I authorize a "one time" charge as indicated.

One time charge in the amount of \$ \_\_\_\_\_.

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ 3 digit code: \_\_\_\_\_

Signed: \_\_\_\_\_

Print name: \_\_\_\_\_

Dated: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PLEASE FAX TO: (678) 868-1379**