

Credit Card Payment Authorization Form

Sign and complete this form to authorize **ADVANCED INDUSTRIAL DEVICES COMPANY LLC** to make a one time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date plus a 2.7% credit card processing fee, which is the fee charged to AID by its third-party credit card payment processor. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the infor	mation below:
I	authorize ADVANCED INDUSTRIAL DEVICES COMPANY LLC
to charge my credit card	
(full name)	
account indicated below for	on or after This payment is for (date)
(description of goods/servi	ces)
Billing Address	Phone#
City, State, Zip	Email
Account Type: 🗌 Visa	☐ MasterCard ☐ AMEX ☐ Discover
Cardholder Name	
Account Number	
Expiration Date	<u> </u>
CVV2 (3 digit number on back of	of Visa/MC, 4 digits on front of AMEX)

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE