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CREDIT CARD AUTHORIZATION FORM

CREDIT CARD TYPE: VISA

MASTER CARD

AMERICAN EXPRESS

CREDIT CARD NUMBER: _____

CREDIT CARD EXPIRATION DATE (MM/YY): _____

SECURITY CODE: _____

(3 DIGIT CODE ON BACK OF VISA & MASTERCARD / FOUR DIGITS ON FRONT OF AMERICAN EXPRESS)

TOTAL SALES AMOUNT: _____

CREDIT CARD BILLING INFORMATION

NAME ON CARD: _____

BILLING ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE: _____

PRINT NAME: _____

PHONE #: _____

___ CHECK IF YOU WOULD LIKE TO AUTHORIZE THIS CARD FOR FUTURE PURCHASES.

Signature above constitutes your agreement to pay the amount specified for below, and authorizes CoreIT Solutions LLC to obtain credit approval from the credit card company. It is understood that you must be at least 18 years of age, legally authorized to use the credit card account number under the terms and conditions of the credit card. Furthermore, understanding and agreeing that the charges specified are irrevocable and may not be charged-back at anytime unless Core IT Solutions LLC fails to deliver what was agreed to upon initiation of the order.