



100 South Andrews Ave
Pompano Beach, FL 33069
Phone: 954-943-6949 • Fax: 954-942-0755
Free: 1 888 654 FOAM

CREDIT CARD AUTHORIZATION FORM

DATE: _____ ORDER #: _____ AFS REP: _____

I, _____, hereby authorize Architectural Foam Supply, Inc. to charge my credit card as follows:

() VISA () MASTERCARD () AMERICAN EXPRESS

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

VID CODE: _____

VS/MC: 3 DIGITS ON BACK OF CARD
AMEX: 4 DIGITS ON FRONT OF CARD

CHARGE AMOUNT: \$ _____

*1.5% VISA/MC FEE: \$ _____

TOTAL CHARGE: \$ _____

CARDHOLDER INFORMATION

NAME: _____

BILLING ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE NUMBER: _____

REQUESTED SHIPPING ADDRESS

NAME OR C/O: _____

STREET: _____

CITY, STATE, ZIP: _____

X

CARDHOLDER'S SIGNATURE

Your completion of this authorization form helps us to protect you, our valued customer, from credit fraud. Architectural Foam Supply, Inc. will keep this information strictly confidential. Thank you for your business.

*Please note, we may assess a 1.5% phone or fax transaction fee for Visa and MasterCard payments.