ADEAL.com
1275 Simpson Way
Escondido, CA 92029
Sales@adeal.com
Phone: (760) 489-2955
Fax: (760) 480-2720

Credit Card Charge Authorization Form

Please fill out this form and fax it to (760) 480-2720

This form confirms your request for payment (Visa/MasterCard only) to

purchase Item/Order#_____

_____

Item Amount $_____ Email _____

S&H $_____ (_____)(_____)(_____)(_____)
Overnight 2nd-Day Standard Others

CA Sales Tax $_____

Total $_____

Your signature below constitutes your agreement to pay the amount specified below, and authorizes Adeal.com to obtain credit approval from said credit card company.

I, _____, hereby authorize Adeal.com to charge my credit card account(s). I affirm that I am at least 18 years old and that I am legally authorized to use the credit card account number(s) specified below. Furthermore, I understand and agree that the charges specified below are irrevocable and may not be charged-back at any time in the future.

SIGNATURE: x_____

Credit Card #: _____

CSC # _____(last three digits as shown on the back of the card)

Expiration Date:_____

Billing Address: _____

_____

Shipping Address: _____

_____

Phone #: _____ Date: _____