



Credit Card Payment Authorization Form

Sign and complete this Form to authorize Perfection Industrial to make a onetime charge to Credit Card listed below.

By signing this Form, I acknowledge that I have reviewed and approve all Auction Terms & Conditions which includes Sales Terms of As Is, Where-Is, with No Return Privileges.

Total amount to be charged: \$_____

For Perfection Invoice #: _____

Description of Goods: _____

☐ Visa

☐ Master Card

Card # _____ Expiration date: __ / __

CVV2 (3 digit number on back of Visa/MC) ___

Name of cardholder: _____

Billing address of cardholder: _____

Signature of cardholder: _____

Date of Approval: _____

Phone number of cardholder: _____

Email Address of cardholder: _____

Please fax completed form back to Accounting @ 847-427-1764 or email it to accounting@perfectionindustrial.com