

E-Z Boy Tours

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Credit Card Authorization Form

Name on the Card: _____

Type of Card: Visa ____ MC ____

Account number _____

Expiration Date _____

Security Code _____

Billing Address _____

City, State, Zip _____

Phone Number _____

Order/Invoice Number _____

Item(s) Purchased _____

Amount to be Charged _____

By signing this form, you authorize _____ to charge your card for the amount listed above.

Signed: _____ Date: _____