

CREDIT CARD AUTHORIZATION FORM

AUTHORIZATION TO CHARGE CREDIT CARD Credit Card Type: _____ Visa ____ MasterCard ____ AMEX ____ Discover Customer Name: _____ Customer Acct #: _____ Cardholder Name: (Exact name as it appears on credit card) Billing Address: ______ State: ____ Zip code: _____ Credit Card Number: _____ (Number will be redacted after payment is processed) Expiration Date: _____/ ____ (mm/yy) Security CVV Code: _____ Check here if you authorize WURTH WOOD GROUP to securely save your credit card number to your account for future purchases and/or transactions. Amount to Charge: \$ _____ (USD) ■ Apply Payment towards account OR Apply Payment towards Sales Order # **AUTHORIZATION** I authorize WURTH WOOD GROUP to charge my credit card as directed above. I agree that I will pay for this purchase in accordance with the issuing cardholder agreement and will not dispute the charge. I certify I am the cardholder and all information above is complete and accurate. This agreement will remain in effect unless I provide written revocation to Wurth Wood Group. CARDHOLDER - Print Name, Sign, and Date Below: Signed: ____ Click on your servicing branch to submit your form: Atlanta Decatur Montgomery Tampa **Baltimore** Greensboro Nashville Birmingham Greenville Norfolk Charleston Hammond Raleigh Charlotte Memphis Richmond Mobile Chattanooga Roanoke

V. 2.1