



## Credit Card Authorization Form

\*Date: \_\_\_\_\_

\*Customer/Company Name: \_\_\_\_\_

\*Name on Card (if different from above) \_\_\_\_\_

\*Billing Address \_\_\_\_\_

\*City, State & Zip Code \_\_\_\_\_

\*Credit Card     Visa         Master Card         Discover

\*Credit Card # \_\_\_\_\_

\*Expiration Date (MM/YY): \_\_\_\_\_/\_\_\_\_\_

\*Security Code on back of card \_\_\_\_\_

\*Transaction Amount \$ \_\_\_\_\_

\*Invoices Paid: (Invoice # and \$ Amount): \_\_\_\_\_

\*Signature of Cardholder: \_\_\_\_\_

\*\*  Yes! Please sign me up for automatic payments.

\*\*If you check the box, your credit card will be kept on file and charged as orders are shipped and / or delivered.

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*Note: By filling out this form you are authorizing Big Valley Wood Products to process the above amount with the Credit Card number provided. A receipt will be faxed or emailed.*

**PLEASE FAX OR EMAIL BACK TO:**  
**Fax: 717-935-5224 • dena@bigvalleywoodproducts.com**

*\*Required Field*