

Kiscosales.com Credit Card Charge Authorization Form

If you would like us to bill your order to the credit card, please complete the form below.

Order #: _____

Check one: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express			
Credit Card Number: _____		Exp. Date:(MM/YYYY) __ / ____	
Name as it appears on card: _____			
Address (to which bills are sent): _____			
City: _____	State: _____	Zip: _____	
Authorized Signature: _____			Date: __ / __ / ____

PLEASE READ & SIGN BELOW:

Our Credit card acceptance policy:

Notice of a *charge back* to our account due to any of the following reasons: "declined charge", "Unauthorized charge", "cancelled credit card" or "closed account" after shipment of our products, will be construed by Kiscosales.com as a deliberate attempt on the part of the card holder to avoid payment. Failure of the card holder to make full restitution within three business days of receiving a request for payment by Kiscosales.com will be considered fraud.

We will make every effort to collect such payment through whatever legal means necessary. This includes a charge of 18% per annum, or the maximum interest rate allowed by law, as well as reasonable attorney's fees (of at least 20%) plus court costs on all uncollected balances. I have read and understand the above policy.

Credit Card Holder sign here: _____ Date: __ / __ / ____

Print and complete the entire form with a dark pen. Card holder must sign on the line indicated.

- **Include a photocopy of a driving licenses, front and back of the signed credit card.**
- **Sign and fax to our secure fax line: 661-327-1540**

All information entered on this form will be kept strictly confidential.

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Note: We need to verify that the license and credit card are in your possession. We do not need the driver's license number or social security number if it is on there. Please make sure we can read your address and that it matches the billing information on your order. On your credit card we need to see the first and last four digits, you can block the rest of the numbers.

<p>Copy Of Driving License</p>	<p>Copy Front Credit Card</p>
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<p>Copy Back Of Credit Card</p>	
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IF YOU'RE DRIVING LICENSE OR IDENTIFICATION CARD DOES NOT MATCH YOUR BILLING ADDRESS PLEASE PROVIDE A COPY OF A UTILITY BILL, CELL PHONE, OR BANK STATEMENT WITH YOUR NAME AND THE ADDRESS AS IT APPEARS ON THE ORDER.

All information entered on this form will be kept strictly confidential.