Sedco Pier Inc.
Manufactured Housing Support Products
33320 Mission Trail · Wildomar, CA 92595
Ph: 951-674-4011 · Fax: 951-674-5720
www.sedcopier.com

Credit Card Payment Authorization

Complete all fields. Type or print clearly.

1. CUSTOMER INFORMATION

BUSINESS NAME

INVOICE / P.O. NUMBER

CONTACT NAME

EMAIL ADDRESS

PHONE

CELL

FAX

2. TRANSACTION DETAILS

DESCRIPTION OF GOODS / SERVICES

AUTHORIZATION DATE (MM / DD / YYYY)

TOTAL CHARGE (INCLUDING TAX AND OTHER FEES)

$

3. CREDIT CARD INFORMATION

TYPE OF CARD ☐ MasterCard ☐ Visa ☐ Discover ☐ American Express

NAME ON CARD

CARD NUMBER

EXPIRATION (MM / YY)

CVV / V-CODE

3 digits on back of card · Amex: 4 digits on front

BILLING ADDRESS (WHERE STATEMENTS ARE SENT)

CITY

STATE

ZIP CODE

4. AUTHORIZATION

I authorize Sedco Pier Inc. to charge the credit card listed above for the amount shown, including all applicable taxes and other charges. I certify that I am the cardholder or an authorized user of this card and that the information provided is accurate. This authorization is for the transaction described on this form.

SIGNATURE OF AUTHORIZATION

DATE

PRINTED NAME / TITLE