## apure.

## **Credit Card Authorization Form**

Sign and complete this form to authorize Apure Distribution, LLC to make a one-time charge to your credit card listed below.

By signing this form, you give Apure Distribution, LLC permission to charge your account for the amount on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

indicated below for:		stribution, LLC to charge by credit card
indicated below for.		
This payment is for Dra	aft/Order/Invoice Number:	
Billing Information		
Billing Address		
City	State	Zip
Email	Phone _	
Card Details		
🗌 Visa 🔄 🗌 Mast	ter Card	ess
Cardholder Name		
Credit Card Number		
Expiration Date/_		
CVV / Security Code _	Billing Zip C	Code
according to the terms above, for the amount authorized user of this so long as the transact By signing below, I ado	outlined above. This payment auth indicated above only, and is valid for credit card and that I will not disput tion corresponds to the terms indica	onditions of sale which can be found on the
Cardholder Signature:		