

# DELLWOOD KITCHEN & FLOOR INC

2240 E WINSTON RD, ANAHEIM CA 92806

TEL: 714-772-2205

FAX: 714-772-2208

EMAIL: info@DellWoodKitchen.com

## \*\*CREDIT CARD PAYMENT FORM \*\*

### Attention:

Please complete this form, attach the Invoice or Quote, and fax/email it back to us with a Valid ID  
We only accept **Visa** and **MasterCard**.

### Check one:

I authorize to keep this card on file for all ongoing purchases through (date):

I authorize DellWood Kitchen & Floor Inc. to charge my credit card as follows:

INVOICE # / QUOTE #: \_\_\_\_\_ Total Amount Charged: \$ \_\_\_\_\_

Card Type:  Visa  Master

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Card Validation #: \_\_\_\_\_  
(3 digits on the back)

Business Name: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

(Street) (City) (State) (Zip)

Card Holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*DRIVER LICENSE #: \_\_\_\_\_

Phone #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

I authorize DellWood Kitchen & Floor Inc to appl the amount above to the card referred on this form. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card Company; as long as the transaction corresponds to the terms indicated in this form.

I give \_\_\_\_\_ permission to pick up the merchandise listed on the invoice that has been charge.  
(NOTE: Driver will be required to show a drivers license & a copy will be made.)