 

MVP Enterprises, Inc

PO Box 1472 - Miami, OK 74355

877.466.7639 toll free 877-466-4321 fax

**Credit Card Payment Authorization Form**

Sign and complete this form to authorize MVP Enterprises, Inc to make a one-time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated 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.

**Please complete the information below:**

I ­­ authorize MVP Enterprises, Inc to charge my credit card

(full name)  
  
on or after This payment is for

(date) (Invoice Number/Amount)

Billing Address Phone#

City, State, Zip Email

|  |
| --- |
| Account Type:  Visa  MasterCard  AMEX  Discover  Cardholder Name  Account Number  Expiration Date  CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) |

Keep this card on file for all purchases?  YES  NO

SIGNATURE DATE

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. 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; so long as the transaction corresponds to the terms indicated in this form.