CREDIT CARD AUTHORIZATION FORM



Snapl 3PL, Fulfillment, FBA Prep, and Logistics Services 410 Jersey Ave. Gloucester City, NJ 08030 Support@Snapl.com

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Date

By signing this form, you give **Snapl Solutions Inc.** permission to charge your credit card 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.

CREDIT CARD INFORMATION	
Card Type (circle one): Visa MasterCard Discover AMEX Other: Cardholder Name (as shown on Business Name (as shown on card Number: Expiration Date (mm/yy): Card Identification Number (last Cardholder Billing Address:	card):
I,(Car	dholder), authorize Snapl Solutions Inc. (Merchant) to charge my credit card
above for the amount of \$	on (mm/dd/yyyy).
This payment is for the following	:
to the terms outlined above. This amount indicated above only, an	rchant to charge the credit card indicated in this authorization form according a payment authorization is for the goods/services described above, for the d is valid for one (1) use only. I certify that I am an authorized user of this pute the payment with my credit card company, so long as the transaction ed in this form.
Name	Signature