



Yorkshore Sales & Marketing, Inc.

1356 Bennett Drive | Longwood, FL 32750

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Credit Card Authorization Form

Please complete this authorization and return.

All information will remain confidential - **3% fee added on all purchases.**

Cardholder Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Credit Card Type: Visa MC American Express

Credit Card Number: _____

Expiration Date: _____ CVV: _____

Invoice Number: _____ PO Number: _____

Invoice Amount: \$ _____ (USD)

I authorize Yorkshore Sales & Marketing to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Print Name, Sign and Date Below:

Name: _____

Phone: _____

Email: _____

Dated: _____

Signed: _____