



# CREDIT CARD AUTHORIZATION

DATE: \_\_\_\_\_ **RVB**  **OCL**

CUSTOMER NAME \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

CARDHOLDER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
**(MUST MATCH WITH THE CARDHOLDER'S BILLING ADDRESS)**

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

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

I \_\_\_\_\_ AUTHORIZED GWB, LLC.  
**(PRINT CARDHOLDER'S NAME)**

TO CHARGE MY FOLLOWING ACCOUNT.

PLEASE CHECK THE FOLLOWING CARD YOU WOULD LIKE TO USE:

- \_\_\_\_\_ VISA
- \_\_\_\_\_ DISCOVER
- \_\_\_\_\_ MASTER CARD

ACCOUNT NUMBER: \_\_\_\_\_

EXPIRATION DATE : \_\_\_\_\_

\_\_\_\_\_  
**CARDHOLDER'S SIGNATURE** \_\_\_\_\_  
**DATE**

By signing above cardholder waives the right to protest or dispute any and all charges with its credit card company or bank. Charges, once made, are final and may only be disputed directly with GWB, LLC. This authorization changes no terms under which cardholder or customer is otherwise bound to GWB, LLC.. All terms and conditions remain in effect.

**PLEASE FAX BACK TO:**  
**954-523-7255 – Michelle DiMaggio**  
[mdimaggio@grandwestern.com](mailto:mdimaggio@grandwestern.com)

Revised: 10/8/15