CREDIT CARD AUTHORIZATION FORM
GHI INTERNATIONAL LLC

Date: _____

Customer Information

Full Name: _____

Billing Address: _____

City: _____

State: _____

ZIP Code: _____

Phone Number: _____

Email Address: _____

Credit Card Information

Credit Card Type: _____

☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Cardholder's Name: _____

Credit Card Number: _____

Expiration Date (MM/YY): _____

CVV (3-Digit Code): _____

Authorization Details

I, the undersigned, authorize GHI Furniture to charge my credit card for the purchase of wholesale Furniture.

I hereby certify that I am the authorized cardholder for the credit card listed above and authorize GHI International, LLC to charge this card for purchases made with GHI International, LLC. This authorization shall remain valid until revoked in writing by the cardholder.

Signature of Cardholder: _____ Date:_____