

SLJW Consultants Inc / DBA Saphe Life  
534 Patrice Place Gardena CA 90248  
(888) 433 - 3114

Date \_\_\_\_\_

<h2>CREDIT CARD AUTHORIZATION</h2>
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Card Type \_\_\_\_\_  
Card Number \_\_\_\_\_  
Expiration date \_\_\_\_\_  
CVC code \_\_\_\_\_

Card Holder Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_  
Zip Code \_\_\_\_\_

I, \_\_\_\_\_, Authorize SLJW Consultants to charge my credit card for the following.

Invoice(s)/Sale order(s) number \_\_\_\_\_

Amount \_\_\_\_\_ Tax \_\_\_\_\_ Total \$ \_\_\_\_\_

Signature \_\_\_\_\_

I understand that my credit card may be charged any additional amounts due to SLJW Consultants for freight or tax. SLJW Consultants will notify me of any additional charges. SLJW Consultants also agrees to credit my credit card for freight if customers picks up

Additional amount charged \$ \_\_\_\_\_

Reason \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_