



## **One Time Credit Card Payment Authorization Form**

Sign and complete this form to authorize Electrical & Electronic Controls (EEC) Ltd. to make a one time debit to your credit card listed below.

By signing this form you give us permission to debit your account 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.

Please complete the information	n below:			
I (full name)	authorize Electrica	l & Electronic Con	trols (EEC) Li	td. to charge
my credit card account indicated below	for(amount)	on or after	(date)	This
payment is for(description of goods/serv	ices or PO #)			
Company Name				
Billing Address		Phone#		
City, Province, Postal Code				
Email				
Account Type:		☐ MasterCard		
Cardholder Name				
Account Number				
Expiration Date	CCV		-	
SIGNATURE		DA <sup>-</sup>	TE	

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.