



ELOQUENCE

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Credit Card Authorization Form

I, _____, hereby authorize Eloquence, LLC
to charge my credit card account in the amount not to exceed: \$

Company:

() Visa () Mastercard () American Express () Discover

Credit Card Number:

Expiration Date:

VID Code:

Credit Card Billing Address:

Street:

City:

State:

Zip Code:

Country: (if not US)

Telephone:

Mobile:

Requested Shipping Address:

Street:

City:

State:

Zip Code:

Country: (if not US)

Telephone:

Mobile:

As the credit card holder, I hereby authorize receipt of goods & services at the shipping address above.

Cardholder's Signature

_____/_____/_____
Date

As the credit card holder, I also authorize Eloquence, LLC. To charge my credit card for
future purchases verbally approved by me.

Authorization Valid Until:

Initials Here:

Your completion of this authorization form helps us protect you, our valued customers,
from credit card fraud. Eloquence will keep all information entered on this form strictly confidential.